

## RENTAL APPLICATION

Should the Applicant have any question regarding the rental unit, please contact Bonnie Robertson at:

Email Address:	Phone Number
State:	Expires:
Driver's license number or any vali	id ID:
FULL NAME OF APPLICANT:	
CO-Al	PPLICANT'S INFORMATION (if applicable)
Email Address:	Phone Number:
State:	Expires:
Driver's license number or any vali	id ID:
FULL NAME OF APPLICANT:	
All applicants must submit a copy obonnie@oasishousingandservices.	of your Driver's License, State ID, Military ID, or Passport to com
	APPLICANT'S INFORMATION
Proposed Move-In Date:	Anticipated Move-Out Date
Location of Applicant's employmen	nt/internship, etc.:
Applicant's reason for leasing a mi etc.):	d-term home (i.e., travel medical professional, internship,
Application to rent property at the	e following address:
The Applicant is a:  ☐ Tenant ☐ Tenant with co-tenant(s) ☐ Guarantor/co-signor	PREMISES INFORMATION
Phone: (501) 681-9363	
Email Address: Bonnie@oasishous	ingandservices.com
should the Applicant have any que	at.



## **EMERGENCY CONTACT**

In cas	se of emergency, please	contact:	
Emer	gency contact:	Relationship:	
Addre	ess:		
Phone Number:		Email Address:	
		CONSENT AND ACKNOWLEDGEMENT	
By sig	ning this Residential Re	tal Application, the Applicant accepts and agrees to the following:	
i.	This is only an applic tenant of the premis	tion to rent and does not guarantee that the Applicant will be selected s.	as a
ii.		ager or his/her authorized Agent could receive multiple rental applicat will only select the most qualified individual.	ions
iii.	Applicant represents	the above information to be true and complete.	
Appli	cant hereby authorizes	ne Landlord or Manager or his/her authorized Agent to do the followin	g:
i. ii. iii.	Obtain a credit repo Applicant further au information and to c	nal information provided above. , as well as other reports, on the Applicant. orizes the Landlord Manager or his/her authorized Agent to request corntact former landlords and/or professionals associated with the Applications (i.e., travel nurse recruiter, internship supervisor, etc.)	
		NOTICE OF NON-DESCRIMINATION	
gende	er expression, age, nati	all not discriminate on the basis of race, color, religion (creed), gender, nal origin (ancestry), disability, marital status, sexual orientation, or I/disapproval of this application.	
Applicant Signature		Date	_
Co-Ap	 oplicant Signature	 Date	-