



C W S C O R P O R A T E H O U S I N G

Individual Application

About You:

Name: _____ Birthdate: _____ Cellular #: _____

Social Security Number: _____ Email address: _____

Driver's License # _____ State: _____

Address: _____ City, State, Zip: _____

Employer: _____ Work Phone: _____

Spouse: _____ Birthdate: _____ Cellular #: _____

Social Security Number _____ Email address: _____

Driver's License # _____ State: _____

How did you find out about CWS Corporate Housing? _____

Please complete for any other occupants over the age of 18:

Name: _____ **DOB:** _____

DL# and State: _____ **SSN:** _____

Name: _____ **DOB:** _____

DL# and State: _____ **SSN:** _____

Name: _____ **DOB:** _____

DL# and State: _____ **SSN:** _____

Your Vehicles:

List all vehicles to be parked by you, your spouse, or any occupants (including cars, trucks, motorcycles, Trailer, etc.)

Make Model Year & Color of vehicle: _____

License Plate #: _____

Make Model Year & Color of vehicle: _____

License Plate #: _____

Your Pets: * *Pet policies are governed by the individual apartment communities.

Will you or any occupant have an animal? Yes No

If so, please answer the following questions:

Number of Pets: _____ Pet Type/Breed: _____ Weight: _____ Age: _____

A Non-Refundable Pet fee is required per Pet. Please indicate if you or your company will be responsible for this fee:
 The Non-Refundable Pet Fee does not cover any pet damages discovered during or after the lease term.

Emergency Contact: Name: _____ Cell #: _____ Home #: _____

If you are seriously ill, in or penitentiary according to an affidavit of the above person or if you die, you authorize (check one or more):
_____ the above person _____ your spouse, and/or your parent to enter your dwelling to remove all personal belongings,
as well as any items in your mailbox, storerooms and commons areas. If you are seriously ill or injured you authorize us to send for an
ambulance at your expense. We are not legally obligated to do so.

Rental/Criminal History

Have you ever been evicted or asked to move out ? _____ Broken a rental agreement or lease contract? _____
Declared bankruptcy? _____ been sued for nonpayment of rent? _____ been sued for damage to rental
property? _____ been convicted of a felony? _____ received deferred adjudication for a felony? _____
Please indicate the year, location and type of account of each felony. _____

Authorization

I authorize CWS Corporate Housing to verify the information provided by all available means. CWS Corporate Housing is not required to reverify or investigate preliminary findings. CWS Corporate Housing will conduct criminal and/or credit checks on all persons age 18 and over residing in the apartment.

Applicant Signature

Date