

FINANCIAL INFORMATION

Your Total Yearly Gross Income: \$ _____ Monthly take-home pay: \$ _____

Employer Name: _____ Employer Address: _____

Employer Phone: (____) _____ - _____

Your position: _____ Supervisor: _____

Length of time with this employer: _____

Your Spouse's Total Monthly Net Income: \$ _____

Employer Name: _____ Employer Address: _____

Employer Phone: (____) _____ - _____

Your position: _____ Supervisor: _____

Length of time with this employer: _____

Other Income Source: _____ Monthly take-home pay: \$ _____

Phone: (____) _____ - _____ Address: _____

Other Income Source: _____ Monthly take-home pay: \$ _____

Phone: (____) _____ - _____ Address: _____

Do you have any financial liabilities that would affect your ability to pay your rent?

REFERENCES

Give three personal references who are not relatives.

1. _____
 Name Relationship Length of time known

 Complete Address Phone

2. _____
 Name Relationship Length of time known

 Complete Address Phone

3. _____
 Name Relationship Length of time known

 Complete Address Phone

I hereby authorize Good News Partners to confirm the information contained in this application and to perform a commercial credit/background check as part of this application.

Signature: _____ Date: _____

There is a one time, non-refundable application fee of \$35.00 that is due upon submission of this application. Please make checks payable to Good News Partners