



DOWNLOAD THE AHI MOBILE APP



ITUNES



ANDROID

**Applicant:** \_\_\_\_\_ SS#: \_\_\_\_\_ D.O.B.: \_\_\_\_\_  
 Email: \_\_\_\_\_ 2nd Email: \_\_\_\_\_  
 Current Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Yrs: \_\_\_\_ Mo: \_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
 Landlord (if applicable): \_\_\_\_\_ Landlord Phone: \_\_\_\_\_  
 Previous Address (if less than 2 years): \_\_\_\_\_ How Long? \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Landlord (if applicable): \_\_\_\_\_ Phone: \_\_\_\_\_  
 Current Employer: \_\_\_\_\_ Salary: \_\_\_\_\_ How Long? \_\_\_\_\_  
 Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Co-Applicant (1):** \_\_\_\_\_ SS#: \_\_\_\_\_ D.O.B.: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Current Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Yrs: \_\_\_\_ Mo: \_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
 Landlord (if applicable): \_\_\_\_\_ Landlord Phone: \_\_\_\_\_  
 Previous Address (if less than 2 years): \_\_\_\_\_ How Long? \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Landlord (if applicable): \_\_\_\_\_ Phone: \_\_\_\_\_  
 Current Employer: \_\_\_\_\_ Salary: \_\_\_\_\_ How Long? \_\_\_\_\_  
 Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Relationship to Applicant: \_\_\_\_\_

**Co-Applicant (2):** \_\_\_\_\_ SS#: \_\_\_\_\_ D.O.B.: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Current Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Yrs: \_\_\_\_ Mo: \_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_  
 Landlord (if applicable): \_\_\_\_\_ Landlord Phone: \_\_\_\_\_  
 Previous Address (if less than 2 years): \_\_\_\_\_ How Long? \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Landlord (if applicable): \_\_\_\_\_ Phone: \_\_\_\_\_  
 Current Employer: \_\_\_\_\_ Salary: \_\_\_\_\_ How Long? \_\_\_\_\_  
 Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Relationship to Applicant: \_\_\_\_\_

Pets  Yes  No (if yes, specify type and weight): \_\_\_\_\_

Family members traveling with you:  Spouse  Child(ren) - names and ages:

Car Make/Model: \_\_\_\_\_ Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

Car Tag #: \_\_\_\_\_ State: \_\_\_\_\_ Exp: \_\_\_\_\_

**How did you hear about us?**

Internet search  Internet Ad  Apartment Guide  Yellow Pages

Referral: \_\_\_\_\_  Other: \_\_\_\_\_

Social Media Sites Use:  Facebook  LinkedIn  Twitter  Pinterest

Devices Use:  Desktop  Tablet/iPad  Smart Phone

Have you downloaded the AHI Mobile APP?  Yes  No

Are you a StayPoints Guest Rewards member?  Yes  No

**Have you ever:**

Filed for Bankruptcy?  No  Yes - date: \_\_\_\_\_

Been evicted from tenancy?  No  Yes - date: \_\_\_\_\_

Been convicted of a felony?  No  Yes - date: \_\_\_\_\_

Willfully or intentionally refused to pay rent when due?  No  Yes - date: \_\_\_\_\_

Are you a registered sex offender?  No  Yes - date: \_\_\_\_\_

**Billing Information:**

Applicant Pay  Company Pay - contact person/phone: \_\_\_\_\_

Bill to Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Party Responsible for Additions and Incidentals?  Applicant  Company - contact if different: \_\_\_\_\_

**IMPORTANT!!!** Payment for apartment and other services including long distance is due on demand in cash, check or approved credit card. I agree to be personally responsible in the event that the indicated person, company, or association fails to pay any part or all of these charges. Credit card authorization form is attached. I hereby make application for occupancy of the described apartment unit on the terms specified. I affirm the above information to be true and correct. All persons and/or firms named above may freely give any requested information concerning me, and I hereby waive all right of action for any consequence resulting from such information. I understand that favorable rental/mortgage history and verifiable employment history are required to approve my application for rental of fully furnish apartment home. Any false information given automatically prohibits me from renting and deems all leases void. I agree to AHI Corporate Housing's privacy policy (found online at [www.ahicorporatehousing.com](http://www.ahicorporatehousing.com))

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Applicant (1) Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Applicant (2) Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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**APPLICANT AUTHORIZATION RELEASE**

In connection with my application with AHI Corporate Housing, Inc. I hereby authorize any consumer agency, current and previous employer, current and any former landlord, law enforcement agency, any check authorization agency, and state employment security agency to release all information any of them may have about me to AHI Corporate Housing. I hereby release all of these parties from any liability in connection with the release of such information. I also authorize AHI Corporate Housing, Inc the use of data contained in my application for residence for demographically or other types of studies or reports.

A facsimile or other copy of this authorization shall be sufficient for release by aforesaid parties.

This authorization is for this transaction only and continues in effect for one (1) year unless limited by state law, in which case, the authorization form continues in effect for the maximum period, not to exceed one (1) year, allowed by law.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ DL State: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Co-Applicant (1) Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ DL State: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Co-Applicant (2) Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ DL State: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**PLEASE NOTE: We authorize credit card payments to make sure the accounts are valid and will accept the charge equal to the amount due at move-in. We only complete the charge if a reservation request is accepted.**