

**MOUNTAIN VALLEY PROPERTIES**  
**633 EAST MAIN STREET**  
**CARBONDALE, IL 62901**  
**PHONE (618)351-1100    FAX (618)549-4575    EMAIL:**  
**office@mvprentals.com**

Applying for: Creekside \_\_\_\_\_ Grand Place \_\_\_\_\_ (please check one)

**\$10 Application fee per person**

Referred By: \_\_\_\_\_

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**PERSONAL INFORMATION:**

Applicant's Name: \_\_\_\_\_  
(First) (MI) (Last)

Current Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
(A copy of your Driver's License and/or Passport is required)

Cell Phone: \_\_\_\_\_ SSN \_\_\_\_\_ DOB \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parents Names: \_\_\_\_\_

Parents Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
(if different from home address)

Parents Phone: (home) \_\_\_\_\_ (cell) \_\_\_\_\_

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**SOURCE OF INCOME:**

Occupation of student: \_\_\_\_\_ Income: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone #: \_\_\_\_\_

**If student, how will rent be paid?**

Financial Aid \_\_\_\_\_ Family \_\_\_\_\_ Student Loan \_\_\_\_\_ Other \_\_\_\_\_

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**PREVIOUS RENTAL REFERENCE:**

Rental address, Apt. # and Complex Name	Lease Begin/End Date	Landlord's Name	Phone#
_____	_____	_____	_____

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If you are a student, will you be attending SIU in the upcoming semester? YES NO

• What year of school are you currently in? FR SO JR SR GRAD

• Have you ever been convicted of a felony? YES NO

Details \_\_\_\_\_

How did you hear about us? Newspaper \_\_\_\_\_ Signs \_\_\_\_\_ Radio \_\_\_\_\_ Friends \_\_\_\_\_ Other \_\_\_\_\_

***I hereby consent to allow Mt. Valley Properties, through its designated agent and its employees, to obtain and verify my credit information, criminal information, and/or eviction information for the purpose of determining whether or not to lease an apartment to me.***

**Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_