

Apartment Application for Chalmers Development

1840 N. Orleans St.
Chicago, IL 60614
312 397-1700
312 397-1701 fax

Name _____

Current Address _____

City, State, ZIP _____

From _____ to _____

Previous Address _____

City, State, ZIP _____

From _____ to _____

Phone Number: Office _____ Email _____

Home _____

Mobile _____

Other _____

Date of Birth _____

Social Security Number _____

Occupation _____

Employer:

Name _____

Address _____

Contact _____ Phone _____

Landlord:

Name _____

Address _____

Contact _____ Phone _____

I understand that there is a fee required to check my background. Further, this fee does not obligate Chalmers Development (CDC) to rent the apartment to me. I authorize CDC to run a credit check, verify my employment and tenant history.

x _____ date _____