

# Village of Dolton Housing Department

## Tenant Rental Form

Phone (708)201-3398 Fax (708)201-3233

*Please type or print clearly*

Property Address \_\_\_\_\_

Landlords Name \_\_\_\_\_

Landlords Address \_\_\_\_\_

Landlords Phone# \_\_\_\_\_ Emergency# \_\_\_\_\_

Tenant Name(s) \_\_\_\_\_

Number of Children in household \_\_\_\_\_

Number of Bedrooms in home \_\_\_\_\_

Child's name \_\_\_\_\_ Age \_\_\_\_\_ M \_\_\_ F \_\_\_

Child's name \_\_\_\_\_ Age \_\_\_\_\_ M \_\_\_ F \_\_\_

Child's name \_\_\_\_\_ Age \_\_\_\_\_ M \_\_\_ F \_\_\_

Child's name \_\_\_\_\_ Age \_\_\_\_\_ M \_\_\_ F \_\_\_

Child's name \_\_\_\_\_ Age \_\_\_\_\_ M \_\_\_ F \_\_\_

Child's name \_\_\_\_\_ Age \_\_\_\_\_ M \_\_\_ F \_\_\_

Child's name \_\_\_\_\_ Age \_\_\_\_\_ M \_\_\_ F \_\_\_

Child's name \_\_\_\_\_ Age \_\_\_\_\_ M \_\_\_ F \_\_\_

Child's name \_\_\_\_\_ Age \_\_\_\_\_ M \_\_\_ F \_\_\_

**Owner's Signature** \_\_\_\_\_ **Date** \_\_\_/\_\_\_/\_\_\_