



678 264-4064

# RENTAL APPLICATION

Every occupant over the age of 18 is **REQUIRED** to fill out a separate application (even if married). Please fill out this form completely and sign, date return with application fee or fax to 678 264-4064..

PERSONAL INFORMATION			
First Name	Middle	Last	Maiden Name
Social Security # ____ - ____ - _____	Date of Birth ____ / ____ / _____	Drivers License #	State
Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married Since _____ <input type="checkbox"/> Divorced Since _____		Do You Smoke <input type="checkbox"/> YES <input type="checkbox"/> NO	Email
Home Phone (____) _____ - _____	Cell Phone (____) _____ - _____	Fax (____) _____ - _____	
Present Home Address		City/State/Zip	
Reason For Leaving	Present Landlord	Landlord Phone (____) _____ - _____	
Length Of Time At Present Address	Present Monthly Rent	Is Your Present Rent Up To Date <input type="checkbox"/> YES <input type="checkbox"/> NO Reason _____	
Previous Home Address		City/State/Zip	
Reason For Leaving	Previous Landlord	Landlord Phone (____) _____ - _____	
Length Of Time At Previous Address	Previous Monthly Rent	Was Your Previous Rent Up To Date <input type="checkbox"/> YES <input type="checkbox"/> NO Reason _____	
Next Previous Home Address		City/State/Zip	
Reason For Leaving	Next Previous Landlord	Landlord Phone (____) _____ - _____	
Length Of Time At Next Previous Address	Next Previous Monthly Rent	Was Your Next Previous Rent Up To Date <input type="checkbox"/> YES <input type="checkbox"/> NO Reason _____	

EMPLOYMENT INFORMATION		
Current Employer	Occupation	Hours/Week
Supervisor	Phone (____) _____ - _____ Ext: __	Years At Current Employer
Employer Address		City/State/Zip
Other Current Employer	Occupation	Hours/Week
Supervisor	Phone (____) _____ - _____ Ext: __	Years At Current Employer
Employer Address		City/State/Zip

FINANCIAL INFORMATION – CURRENT INCOME		
Current Income \$ _____ <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly	Source	Proof Of Income <input type="checkbox"/> YES <input type="checkbox"/> NO
Current Income \$ _____ <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly	Source	Proof Of Income <input type="checkbox"/> YES <input type="checkbox"/> NO
Current Income \$ _____ <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly	Source	Proof Of Income <input type="checkbox"/> YES <input type="checkbox"/> NO
Current Income \$ _____ <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly	Source	Proof Of Income <input type="checkbox"/> YES <input type="checkbox"/> NO

FINANCIAL INFORMATION – CHECKING AND SAVINGS			
Checking Account Number	Bank and Branch	Amount	Bank's Phone (____) _____ - _____
Savings Account Number	Bank and Branch	Amount	Bank's Phone (____) _____ - _____

FINANCIAL INFORMATION – CURRENT INCOME			
Car Loan Lien Holder	Balance Owed	Monthly Payment	Creditor's Phone ( _____ ) _____ - _____
Credit Card Company	Balance Owed	Monthly Payment	Creditor's Phone ( _____ ) _____ - _____
Credit Card Company	Balance Owed	Monthly Payment	Creditor's Phone ( _____ ) _____ - _____
Credit Card Company	Balance Owed	Monthly Payment	Creditor's Phone ( _____ ) _____ - _____
Other Credit Owed	Balance Owed	Monthly Payment	Creditor's Phone ( _____ ) _____ - _____
Other Credit Owed	Balance Owed	Monthly Payment	Creditor's Phone ( _____ ) _____ - _____

OTHERS WHO WILL BE LIVING AT PROPERTY			
Name	Relationship	Occupation	Age
Name	Relationship	Occupation	Age
Name	Relationship	Occupation	Age
Name	Relationship	Occupation	Age
Name	Relationship	Occupation	Age

VEHICLE INFORMATION					
Year	Make	Model	Color	Tag Number	State
Year	Make	Model	Color	Tag Number	State

EMERGENCY CONTACT INFORMATION		
Emergency Contact	Phone ( _____ ) _____ - _____ <input type="checkbox"/> Cell <input type="checkbox"/> Home	Phone ( _____ ) _____ - _____ Ext: __ <input type="checkbox"/> Home <input type="checkbox"/> Work
Relation	Address	City/State/Zip
Emergency Contact	Phone ( _____ ) _____ - _____ <input type="checkbox"/> Cell <input type="checkbox"/> Home	Phone ( _____ ) _____ - _____ Ext: __ <input type="checkbox"/> Home <input type="checkbox"/> Work
Relation	Address	City/State/Zip

QUESTIONNAIRE AND AUTHORIZATION			
Ever been sued for nonpayment?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Ever been locked out of residence by the sheriff?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Ever been bankrupt?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Ever been brought to court by another landlord?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Ever been found guilty of a felony?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Ever moved owing rent or damaged a rented residence?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Ever broken a lease?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Is the total move in amount ready now (rent and deposit)?	<input type="checkbox"/> YES <input type="checkbox"/> NO
<p>I authorize the agent for owner of this property to verify the above information and obtain a background check. In performing the background checks, we may request a "consumer report" to learn information about you that may be used in making a rental decision. A consumer report is a report obtained from a consumer reporting agency that may include, but is not limited to, your criminal history which may be on file in any federal, state, or local agency and your credit history.</p> <p>This is an equal housing opportunity.</p> <p><b>Applicant Signature:</b> _____ <b>Date:</b> _____</p> <p><b>Address of Rental Unit:</b> _____</p>			