

APPLICATION FOR RESIDENCY

MUST BE FILLED OUT COMPLETELY - THANK YOU

NAME LAST FIRST MIDDLE MAIDEN DATE OF BIRTH SOCIAL SECURITY #
SPOUSE / ROOMMATE
PRESENT PHONE NO. () Email Address:
HAVE YOU EVER BEEN EVICTED FROM ANY LEASED PREMISES? AMOUNT OF RENT PETS (Keeping of pets requires a pet deposit and owner's consent) BREED AGE
PRESENT ADDRESS STREET # NAME APT # CITY STATE ZIP OWN RENT [] SINCE / / / /
LANDLORD MTG CO. NAME ADDRESS CITY STATE ZIP PHONE NO. ()
PREVIOUS ADDRESS STREET # NAME APT # CITY STATE ZIP OWN RENT [] FROM / / / / TO / / / /
LANDLORD MTG CO. NAME ADDRESS CITY STATE ZIP PHONE NO. ()

FOR OFFICE USE ONLY

Table with 14 columns: Move In Date, Lease Expir. Date, Lease Full'd Y/N, S-skip E-evict A-asked To Vacate, Sufficient Notice Y/N, Number Occup., Pets Y/N, Rent Amount \$, Pays on Time Y/N, # Late Charges, # Returned Checks, Damage Y/N, Money Left Owng \$, Move Out Date

PRESENT EMPLOYER NAME BUSINESS ADDRESS CITY STATE PHONE NO. ()
POSITION SUPERVISOR MONTHLY INCOME SINCE / /

PREVIOUS EMPLOYER NAME BUSINESS ADDRESS CITY STATE PHONE NO. ()
POSITION SUPERVISOR MONTHLY INCOME SINCE / /

SPOUSE / ROOMMATE NAME BUSINESS ADDRESS CITY STATE PHONE NO. ()
POSITION SUPERVISOR MONTHLY INCOME SINCE / /

EMERGENCY CONTACT NAME FULL ADDRESS PHONE # ()

AUTOMOBILE 1st CAR YEAR MAKE MODEL COLOR TAG # 2nd CAR YEAR MAKE MODEL COLOR TAG #
PERSONAL DESCRIPTION HT. WT. HAIR COLOR DRIVER'S LIC.# STATE SPOUSE / ROOMMATE HT. WT. HAIR COLOR DRIVER'S LIC.# STATE
CHILDREN OCCUPYING NAME AGE NAME AGE NAME AGE
BANK REF NAME LOCATION CITY STATE STATE ACCT.# PHONE # ()
CREDIT CARD NAME BANK ACCT.# CITY STATE PHONE # ()
CREDIT CARD NAME BANK ACCT.# CITY STATE PHONE # ()

Have you ever been arrested for a misdemeanor and or felony? YES NO
Explain: _____

Have you ever been convicted for a misdemeanor and or felony? YES NO
Explain: _____

CORRECTION INFORMATION - Applicant represents that all of the above statements are true and complete, and hereby, authorizes verification of the above information, references and credit records in addition to the foregoing, applicant(s) has paid to Landlord herewith the sum of \$ _____ as a non-refundable fee for Landlord's costs and expenses in checking applicant's credit. Applicant acknowledges that false information herein may constitute grounds for rejection of this application, termination of right of occupancy and or forfeiture of deposits and may constitute a criminal offense under the laws of this State. Furthermore, I understand that a investigative consumer report including information about my character, general reputation, personal characteristics, mode of living, all public record information including criminal records may be made. I understand that a written request for the nature and scope of the investigation if made within a reasonable period of time may be made. I understand that misrepresentation of the above information will void my lease/rental agreement and be grounds for immediate eviction with loss of all deposits. I authorize verification of this information by the Landlord or his agent.

APARTMENT DEPOSIT AGREEMENT - Applicant has deposited and "Apartment Deposit" in consideration for owners taking the dwelling unit off the market while considering approval of this application. If applicant is approved by owner and the lease is entered into, the apartment deposit shall be credited to the required security deposit. If applicant is approved but fails to enter the Lease, the Apartment Deposit shall be forfeited to owner. The apartment deposit will be refunded only if applicant is not approved. Keys will be furnished only after lease and other rental documents have been properly executed by all parties and only after applicable rentals and security deposits have been paid. This application is preliminary only and does not obligate owner or owner's agent to execute a lease or deliver possession of the proposed premises.

EQUAL CREDIT OPPORTUNITY ACT - The Federal ECOA prohibits from discrimination against credit applicants on the basis of sex or marital status. The Federal Agency which administers compliance with this law concerning this apartment community is Federal Trade Commission. 1718 Peachtree St. N.W. Room 10000, Atlanta, Georgia 30308.

I HAVE READ AND AGREE TO THE PROVISIONS AS STATED.
Applicant's Signature Date
Spouse's Signature Date
SECURITY DEPOSIT \$
PET SECURITY \$
PET FEE \$
CREDIT CHECK FEE \$
PAID WITH APPLICATION \$
BALANCE OF DEPOSIT DUE \$
FIRST MONTH'S RENT \$
TOTAL DUE BEFORE MOVE-IN \$
RECEIVED BY: DATE
APPROVED BY: DATE
OFFICE USE ONLY
COMMUNITY
APT. NUMBER
RENT
APT. TYPE
TERM OF LEASE
MOVE-IN DATE
APS REPORT
DATE ORDERED
DATE RECEIVED