



2624 West Blvd, Charlotte, NC 28208
Office: 704-900-3354 Fax: 704-973-9248
RENTAL APPLICATION

PLEASE PRINT - ALL information must be completed. All blanks must be filled in. The decision to rent to you will greatly depend on your credit history and references. Only clean & responsible people who pay rent on time need apply.

How did you find out about us? Sign []: Newspaper []: Friend []: Other [] _____

FULL ADDRESS OF PROPERTY YOU WISH TO RENT: _____

TODAY'S DATE: _____ DESIRED DATE OF OCCUPANCY: _____

PETS? (Type, breed, weight, age) _____

* NOTE: No pets are allowed at any time on the premises without prior Management consent and/or payment of fees - NO EXCEPTIONS

PRIMARY APPLICANT PERSONAL INFORMATION

Full Name _____ Phone (____) _____ Work Phone (____) _____

Email address: _____ Social Security Number _____ - _____ - _____

Birthday _____ Current Driver's License # _____ State: _____

Present Address _____ City: _____ State: _____ Zip: _____

Dates: From: _____ To: _____ Monthly Rent \$ _____ If renting, Apartment name/location _____

Office Phone: (____) _____ Landlord/mgr's name _____ Alternate Phone: (____) _____

Why are you leaving? _____

Previous Address _____ City: _____ State: _____ Zip: _____

Dates: From: _____ To: _____ Monthly Rent \$ _____ If renting, Apartment name/location _____

Office Phone: (____) _____ Landlord/mgr's name _____ Alternate Phone: (____) _____

Why are you leaving? _____

EMPLOYMENT:

Present Employer _____ Position: _____ Dates: From: _____ To: _____

Address _____ Phone: (____) _____ Position: _____

Former Employer _____ Position: _____ Dates: From: _____ To: _____

Address _____ Phone: (____) _____ Position: _____

Why did you leave? _____

Gross Monthly Income before deductions: \$ _____ Other Income: \$ _____ Source: _____

CO-APPLICANT PERSONAL INFORMATION

Full Name _____ Phone (____) _____ Work Phone (____) _____

Email address: _____ Social Security Number _____ - _____ - _____

Birthday _____ Current Driver's License # _____ State: _____

Present Address _____ City: _____ State: _____ Zip: _____

Dates: From: _____ To: _____ Monthly Rent \$ _____ If renting, Apartment name/location _____

Office Phone: (____) _____ Landlord/mgr's name _____ Alternate Phone: (____) _____

Why are you leaving? _____

Previous Address _____ City: _____ State: _____ Zip: _____

Dates: From: _____ To: _____ Monthly Rent \$ _____ If renting, Apartment name/location _____

Office Phone: (____) _____ Landlord/mgr's name _____ Alternate Phone: (____) _____

Why are you leaving? _____

EMPLOYMENT:

Present Employer _____ Position: _____ Dates: From: _____ To: _____

Address _____ Phone: (____) _____ Position: _____

Former Employer _____ Position: _____ Dates: From: _____ To: _____

Address _____ Phone: (____) _____ Position: _____

Why did you leave? _____

Gross Monthly Income before deductions: \$ _____ Other Income: \$ _____ Source: _____

HAVE YOU OR CO-APPLICANT EVER:

Been evicted or asked to move out? YES NO Been sued for nonpayment of rent? YES NO

Explain: _____

Had a foreclosure/repossession? YES Date _____ NO Broken a Rental Agreement or Lease? YES NO

If yes, explain: _____

Have you ever filed for bankruptcy? YES Date _____ NO If yes, Chapter 7 or Chapter 13

Have you ever been convicted of a crime, other than a traffic violation? YES NO

If yes, explain: _____

EMERGENCY INFORMATION - In an emergency you may contact (List two, other than spouse/roommate, nearest relatives first)

Name _____ Relationship _____ Phone: (____) _____

Address _____ City _____ State _____ Zip _____

Name _____ Relationship _____ Phone: (____) _____

Address _____ City _____ State _____ Zip _____

OTHER INFORMATION: LIST CHILDREN WHO WILL LIVE IN THE DWELLING UNIT

M / F Age _____ Name _____ M / F Age _____ Name _____

M / F Age _____ Name _____ M / F Age _____ Name _____

Do you own: Vacuum cleaner Lawn Mower Water bed Musical instruments Does anyone smoke? Yes No

List all motor vehicles, including recreational vehicles, to be kept at the property:

MAKE	MODEL	COLOR	YEAR	LICENSE PLATE #	STATE	MONTHLY PAYMENT
_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	\$ _____

Automatic Rejection Items:

- Unlisted Previous Evictions or Outstanding Judgments on Public Record
- Class A,B,C, or D Felony Conviction
- Household Monthly Income of Less Than 3X the Monthly Rent Amount
- False Information Given on Rental Application
- Unsatisfactory Landlord Report

Information Needed to Process Application:

- Driver's License
- Proof of Monthly Income (Bank Statements, Tax Statements, Paycheck Stubs)
- \$35.00 Application Fee Per Adult in Money Order or Cash Form

A non-refundable application fee of \$35.00 per adult is required for processing this application, and is being paid herewith. The undersigned expressly agrees that if this application is approved applicant herewith agrees to rent this property. Processing of application shall be as timely as possible and the results may be delivered via telephone, fax or mail. Once approved, applicant agrees to pay the balance of funds and complete the paperwork within 48 hours, otherwise management will assume that applicant has decided not to rent the property and management will begin re-marketing the property.

A PHOTOSTATIC COPY OF MY DRIVER'S LICENSE OR PICTURE IDENTIFICATION CARD AND LATEST PAY CHECK STUB(S) ARE ATTACHED TO THE APPLICATION [], OR WILL BE PROVIDED []. I declare that the application is complete, true and correct and I herewith give my permission for anyone contacted to release the credit or personal information of the undersigned applicant to Management or their authorized agents, at any time, for the purposes of entering into and continuing to offer or collect on any agreement and/or credit extended. I further authorize Management or their Authorized Agents to verify the application information including but not limited to obtaining criminal records, contacting creditors, present or former landlords, employers and personal references, whether listed or not, at the time of the application and at any time in the future, with regard to any agreement entered into with Management. Any false information will constitute grounds for rejection of this application, or Management may at any time immediately terminate any agreement entered into in reliance upon misinformation given on this application.

Primary Applicant's Authorization

Date

Secondary Applicant's Authorization

Date