

# RENTAL/LEASE APPLICATION

Date of Application: \_\_\_\_\_

Property Address: 110 Sugar Ski Dr.

Unit No.: 10-602

City, State, Zip Code: Sugar Mountain , NC 28604

## Applicant

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Driver's License No. \_\_\_\_\_ Driver's License State of Issue \_\_\_\_\_

## Residence History

Provide at least 2 years of history.

Current Address \_\_\_\_\_ Unit No. \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Dates of Residence: From \_\_\_\_ / \_\_\_\_ To \_\_\_\_ / \_\_\_\_ Monthly Rent \$ \_\_\_\_\_

Reason For Moving \_\_\_\_\_

Check one: Own \_\_\_\_\_ Rent \_\_\_\_\_ Other (specify) \_\_\_\_\_

If Rent, Name of Landlord \_\_\_\_\_ Landlord Phone No. \_\_\_\_\_

Previous Address \_\_\_\_\_ Unit No. \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Dates of Residence: From \_\_\_\_ / \_\_\_\_ To \_\_\_\_ / \_\_\_\_ Monthly Rent \$ \_\_\_\_\_

Reason For Moving \_\_\_\_\_

Check one: Own \_\_\_\_\_ Rent \_\_\_\_\_ Other (specify) \_\_\_\_\_

If Rent, Name of Landlord \_\_\_\_\_ Landlord Phone No. \_\_\_\_\_

Did you live with other individuals? (Yes or No) \_\_\_\_\_

If yes, provide details \_\_\_\_\_

Have you ever been evicted? (Yes or No) \_\_\_\_\_

If yes, provide explanation \_\_\_\_\_

Have you ever broken a lease? (Yes or No) \_\_\_\_\_

If yes, provide explanation \_\_\_\_\_

## Employment / Financial

Provide at least 2 years of history.

Current Employer \_\_\_\_\_ Position/Title \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip Code \_\_\_\_\_  
Name of Supervisor \_\_\_\_\_ Phone Number \_\_\_\_\_  
Dates of Employment: From \_\_\_\_ / \_\_\_\_ To \_\_\_\_ / \_\_\_\_ Monthly Income \$ \_\_\_\_\_

Previous Employer \_\_\_\_\_ Position/Title \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip Code \_\_\_\_\_  
Name of Supervisor \_\_\_\_\_ Phone Number \_\_\_\_\_  
Dates of Employment: From \_\_\_\_ / \_\_\_\_ To \_\_\_\_ / \_\_\_\_ Monthly Income \$ \_\_\_\_\_

Previous Employer \_\_\_\_\_ Position/Title \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip Code \_\_\_\_\_  
Name of Supervisor \_\_\_\_\_ Phone Number \_\_\_\_\_  
Dates of Employment: From \_\_\_\_ / \_\_\_\_ To \_\_\_\_ / \_\_\_\_ Monthly Income \$ \_\_\_\_\_

**Other Sources of Income**

(Provide any other sources of income that you want the Landlord to consider.)

Source of Income \_\_\_\_\_ Amount of Income \_\_\_\_\_  
Source of Income \_\_\_\_\_ Amount of Income \_\_\_\_\_  
Source of Income \_\_\_\_\_ Amount of Income \_\_\_\_\_

**Vehicles to be Parked at Property**

Vehicle Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_  
License Plate Number \_\_\_\_\_ State \_\_\_\_\_

**Other**

Have you ever been convicted of a crime? (Yes or No) \_\_\_\_\_  
If yes, provide explanation \_\_\_\_\_

Have you ever declared bankruptcy? (Yes or No) \_\_\_\_\_  
If yes, provide explanation \_\_\_\_\_

**Emergency Contact**

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip Code \_\_\_\_\_

Relationship \_\_\_\_\_ Phone Number \_\_\_\_\_

It is against the law to discriminate against any person in the terms, conditions or privileges or rental of a dwelling, or in the provision of services or facilities in connection with such dwelling, because of race, color, religion, sex, handicap, familial status or national origin. State and local laws may protect additional classes from housing discrimination.

Applicant authorizes the verification of all statements and information provided in this application including rental history, current and previous employment and income, bank and credit account details and any other relevant information necessary for Landlord to evaluate this application. Applicant further authorizes Landlord and its agents to obtain a consumer credit report and a criminal background report. If Applicant has provided any false or incomplete information in this application, Landlord may reject this application and/or terminate the lease agreement.

Applicant certifies that all statements provided in this Lease Application are true, correct, and complete.

\_\_\_\_\_  
**Applicant Signature**

**Date:** \_\_\_\_\_

\_\_\_\_\_  
**Landlord Signature**

**Date:** \_\_\_\_\_