

Date received \_\_\_\_\_  
App fee paid \_\_\_\_\_  
Approved or declined \_\_\_\_\_  
Move in date \_\_\_\_\_  
Letter sent \_\_\_\_\_

# Realty World Southeastern

200 US Hwy 117S

Burgaw, NC 28425

910-259-7156 office 910-259-7157

910-231-4570 mobile, Sharon

## Rental Application

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

Address of Property you are interested in: \_\_\_\_\_ Date

occupancy desired: \_\_\_\_\_

### Personal Information of Applicant

Full name: \_\_\_\_\_

Birth date: \_\_\_\_\_

Driver's license/ID number/state: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Additional Occupants (List every occupant's name and relationship, including children) \_\_\_\_\_

### Information:

How long do you plan on living in the rental home that meets your needs? \_\_\_\_\_

Do you have renter's insurance? \_\_\_\_\_

Do you have or plan to use any water-filled furniture? \_\_\_\_\_

Have you ever broken a lease? \_\_\_\_\_

Have you ever refused to pay rent for any reason? If so, why? \_\_\_\_\_

Have you ever been evicted or asked to leave a rental unit? \_\_\_\_\_

Have you ever filed for bankruptcy? \_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_

Do you give us permission to do a criminal background check? \_\_\_\_\_

Do you currently have any utilities in your name? \_\_\_\_\_

Do you currently have phone service in your name? \_\_\_\_\_

Is there anything to prevent you from placing utilities or a phone in your name? \_\_\_\_\_

Do you know of anything or any reason that may interrupt your ability to pay rent? \_\_\_\_\_

\_\_\_\_\_

**Residence History**

Present street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Dates lived at this address \_\_\_\_\_

Did you own \_\_\_\_\_ rent \_\_\_\_\_ occupy \_\_\_\_\_

Current phone: \_\_\_\_\_ Cell: \_\_\_\_\_

How many pets do you have? \_\_\_\_\_ Type: \_\_\_\_\_

Name of present landlord/owner/mortgage company: \_\_\_\_\_

Address of present landlord/mortgage company: \_\_\_\_\_

Landlord's phone: \_\_\_\_\_ Monthly payment: \_\_\_\_\_

Reason for moving: \_\_\_\_\_

Is your rent or mortgage current? \_\_\_\_\_

Number of late payments in the last 12 months? \_\_\_\_\_

Security deposit amount currently held by landlord? \_\_\_\_\_

*Previous residence address:*

Previous landlord: \_\_\_\_\_

Previous landlord's phone: \_\_\_\_\_

Dates at this address: \_\_\_\_\_

Reason for moving: \_\_\_\_\_

Was your full security deposit returned? \_\_\_\_\_

Number of late payments \_\_\_\_\_

Monthly payment \_\_\_\_\_

**Income History**

Current employment status:

Full-time: \_\_\_\_\_ Part-time (less than 32 hours.): \_\_\_\_\_ Student: \_\_\_\_\_

Retired: \_\_\_\_\_ Self Employed: \_\_\_\_\_ Other: \_\_\_\_\_

**Primary source of employment**

Applicant employed by: \_\_\_\_\_

Supervisor's name: \_\_\_\_\_

Average weekly hours: \_\_\_\_\_

How long at they place of employment? \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Position: \_\_\_\_\_

Salary: \_\_\_\_\_

Weekly, biweekly, monthly, or annual average take-home pay \_\_\_\_\_

**Additional Employment**

Employed by: \_\_\_\_\_  
Supervisor's name: \_\_\_\_\_  
Average weekly hours: \_\_\_\_\_  
How long at that place of employment? \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Position: \_\_\_\_\_  
Salary: \_\_\_\_\_  
Weekly, biweekly, monthly, or annual average take-home pay \_\_\_\_\_

**Emergency contact**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Additional phone: \_\_\_\_\_

**Vehicle Information:**

Number of vehicles on property? \_\_\_\_\_  
Valid registration and inspection? \_\_\_\_\_  
Do you have any commercial vehicles, campers, boats, or motorcycles?  
\_\_\_\_\_

Vehicle make/model/color/year): \_\_\_\_\_

*Please note, only cars on application are authorized to be on premises.*

Plate number: \_\_\_\_\_ State: \_\_\_\_\_

Vehicle (make/model/color/year): \_\_\_\_\_

*Please note, only cars on application are authorized to be on premises.*

Plate number: \_\_\_\_\_ State: \_\_\_\_\_

**List all current monthly expenses**

Hospital payment: \_\_\_\_\_  
Health insurance: \_\_\_\_\_  
Auto insurance: \_\_\_\_\_  
Renter's insurance: \_\_\_\_\_  
Child care: Tuition: \_\_\_\_\_  
Cable TV: \_\_\_\_\_  
Electric: \_\_\_\_\_

Phone: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Total: \_\_\_\_\_

**Personal/professional references**

*Character/personal reference:*

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Relationship? \_\_\_\_\_  
How long? \_\_\_\_\_ Phone: \_\_\_\_\_

*Name of nearest living relative:*

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Relationship? \_\_\_\_\_  
How long? \_\_\_\_\_ Phone: \_\_\_\_\_

Do you give owner or manager permission to contact the references listed above both now and in the future for rental consideration or for collection purposes should that be deemed necessary?

If management has a question regarding this application, what is the best contact phone number?

Day phone/contact person: \_\_\_\_\_

Night phone/contact person: \_\_\_\_\_

Thank you for completing the rental application. Please sign below.

A completed application requires submission of the following, which will be copied and attached to this application:

- Driver's license or government-issued picture ID  
[Note: Rentals will not be shown without picture ID]
- Two most current pay stubs of each income source listed
- If self-employed, most current Schedule C tax return and proof of current income

A fee of \$ 40.00 is charged on all rental applicants for the purpose of verifying the information furnished on this application. By signing below, applicant hereby represents that all information on this application is true and complete and hereby authorize annual verification of information, references, and credit history for continual rental consideration or for collection purposes should that become necessary. This fee is non-refundable.

Applicant acknowledges this application will become part of the lease agreement when approved. If any information is found to be incorrect, the application will be rejected and any subsequent rental agreement becomes void.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

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