

Office Use Only
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: _____
