

FAIRWAYS AT BEY LEA, LLC RENTAL APPLICATION

LEASE TERM: _____ 1 Year _____ 2 Year MOVE-IN DATE DESIRED: _____ APT. NO. _____

WHERE DID YOU HEAR ABOUT US? _____ **Primary Email Address** _____

APPLICANT/SPOUSE (Unmarried Applicants, Please Fill Out Separate Applications)

NAME(S): _____ SOCIAL SECURITY NO.: _____ DATE OF BIRTH: _____
_____-_____-_____/_____/_____
_____-_____-_____/_____/_____

The Following Persons Will Also Occupy The Above Apartment: (Name, Relationship, and Age)

Please give Phone Numbers where you can be located:

Day Phone: _____ Night Phone: _____ Cell Phone: _____

RESIDENCE:

Current Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ (Rent-Own-Other) Dates: _____ to _____

Landlord/Mortgage Co.: _____ City: _____ Phone: _____

Rent/Mortgage Payment: \$ _____ Reason For Leaving: _____

Previous Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ (Rent-Own-Other) Dates: _____ to _____

Landlord/Mortgage Co.: _____ City: _____ Phone: _____

Rent/Mortgage Payment: \$ _____ Reason For Leaving: _____

EMPLOYMENT:

Present Employer: _____ Address: _____ City: _____ State: _____

Income: \$ _____ wk/mo/yr Position: _____ Phone: _____

Supervisor: _____ Dates: _____ to _____

Previous Employer: _____ Address: _____ City: _____ State: _____

Income: \$ _____ wk/mo/yr Position: _____ Phone: _____

Supervisor: _____ Dates: _____ to _____

Spouse's Employer: _____ Address: _____ City: _____ State: _____

Income: \$ _____ wk/mo/yr Position: _____ Phone: _____

Supervisor: _____ Dates: _____ to _____

Additional Income: _____ wk/mo/yr Source: _____

Have you ever been evicted from an apartment? YES/NO

Have you ever been in breach of a rental or mortgage agreement? YES/NO

Have you ever filed for bankruptcy? YES/NO If yes, when _____

Do you currently have any negative credit accounts for loans? YES/NO

Do you pay child support? YES/NO If yes, what is the amount you pay? \$ _____ wk/mo/yr

BANKING HISTORY:

Bank Name: _____ Address: _____

Make of Auto: _____ Year _____ Driver's License No.: _____

License Plate No.: _____ State: _____ Making Payments To: _____ Monthly Amt.: \$ _____

Nearest Relative (To Be Contacted In Case Of Emergency): _____ How Related? _____

Address: _____ Phone: _____

In the event the rental application is approved, the owner or agent will apply the deposit of \$200.00 toward the first month's rent. If the application is approved, but the undersigned chooses not to and/or does not enter into the lease within two (2) weeks of approval, the deposit will be forfeited as liquidated damages incurred by the owner as a result of not having been able to rent the apartment to another party during this time, unless otherwise agreed to in writing. Upon rejection of the application, the undersigned will be refunded the full holding fee.

APPLICANT(S) certifies and represents that all information on this application is correct; that he/she is not breaking his/her lease, that he/she has paid his/her rent/mortgage payments in a timely fashion; that he/she has received no notices of Lease Termination or Eviction; that he/she has not filed for bankruptcy within the past five (5) years, and is presently financially solvent; and that no adverse credit information is on record. APPLICANT(S) hereby understands that the discovery of any negative rental/mortgage, credit or financial information or providing any false information is reason for denial. A non-refundable charge of \$125.00 will be retained for credit check purposes. \$6.50 fee per person for criminal back ground check separate charge on top of the application fee.

APPLICANT(S) authorizes LESSOR and/or CAVALIER PROPERTY SERVICES, INC. to verify the accuracy of all statements in this application, and also authorizes all employers, present and previous landlords, and creditors to release all information concerning applicant or applicant's account(s) for the purpose of verifying this application and determining applicant's ability to afford the contractual obligations of the lease. Applicant releases all persons delivering this information from any inadvertent error.

APPLICANT SIGNATURE: _____ DATE: _____

APPLICANT SIGNATURE: _____ DATE: _____

AUTHORIZATION AND UNDERSTANDING STATEMENT

(PRINT CLEARLY)

Name: _____	
Social Security Number: _____	
Drivers License Number and State: _____	Date of Birth: _____
Address: _____	
City: _____	State/Zip: _____

I authorize management or it's security agent, Cavalier Property Services, Inc. to contact either orally or in writing any third parties to obtain information which this company or it security agent deems necessary and appropriate in verifying my application. I specifically authorize this company or it's designated agent to obtain from any **state or local law enforcement agency** to include US Military authorities concerning my conduct, including records of any **Criminal History Record** information and **Motor Vehicle Records**.

Applicant Signature

Sign: _____	Date: _____
Signature of the employee who has validated applicant's picture ID.	