

THE FAIRWAYS AT BEY LEA RENTAL APPLICATION

APPLYING AT: THE FAIRWAYS AT BEY LEA MOVE-IN DATE DESIRED: APT. NO.

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

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

Blank lines for name, social security number, and date of birth.

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

Blank lines for listing other occupants.

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 \$75.00 will be retained for credit check purposes.

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:

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