

RENTAL APPLICATION

Agent/Ph: _____

Today's Date _____ Date of anticipated move in _____
Property address _____
Monthly rent _____ Security deposit _____ Pet deposit _____

Applicant

Full name of applicant _____
Present Address _____
Telephone number (home) _____ (work) _____
D.O.B. _____ social security # _____ Driver's license _____

Applicant's employment

Name of present employer _____
Address _____
Position _____ Date started _____ Monthly income _____
Supervisor's name _____ phone _____
Name of previous employer _____
Address _____
Position _____ Date started _____ Monthly income _____
Supervisor's name _____ phone _____
Other sources of income _____

Spouse/Co-Applicant

Full name _____
Present Address _____
Telephone number (home) _____ (work) _____
D.O.B. _____ social security # _____ Driver's license _____

Spouse/Co-Applicant's employment

Name of present employer _____
Address _____
Position _____ Date started _____ Monthly income _____
Supervisor's name _____ phone _____
Name of previous employer _____
Address _____
Position _____ Date started _____ Monthly income _____
Supervisor's name _____ phone _____
Other sources of income _____

Present Landlord or mortgage company

Telephone numbers _____ (2ndary) _____
Monthly rent or mortgage payment _____ Date of move-in _____ Date of move-out _____

Previous Landlord or mortgage company

Telephone numbers (Hm/Wk) _____ (2ndary) _____
Monthly rent or mortgage payment _____ Date of move-in _____ Date of move-out _____

Personal References

Name _____ phone _____
Address _____
Relation to applicant: _____ Which Applicant: _____ Yrs known: _____

Name _____ phone _____

Address _____

Relation to applicant: _____ Which Applicant: _____ Yrs known: _____

Name _____ phone _____

Address _____

Relation to applicant: _____ Which Applicant: _____ Yrs known: _____

Emergency

In case of emergency contact _____

Relationship _____ phone _____

Occupants

List all occupants _____

Pets

List any pets: type _____ breed _____ weight _____ age _____

List any pets: type _____ breed _____ weight _____ age _____

Vehicles

List vehicles to be parked at premises: _____

make _____ model _____ year _____

make _____ model _____ year _____

Credit/Criminal History

Bank name _____ phone _____

Address _____

Checking account number _____

List credit obligations with minimum monthly payment: _____

(Credit alone is not a deterrent. We will consider the entire application. Please attach letter of explanation for any known credit issues)

Have any of the occupants listed above ever been: convicted of a felony? _____ received deferred adjudication for a felony? _____ been evicted? _____ broken a lease? _____ declared bankruptcy? _____

(Use additional sheet to explain) When: _____

The above listed applicant declares that all statements made in this application are true and complete. Applicant hereby authorizes the Landlord or Landlord's representative to verify all of the information in this application and to obtain credit reports and background checks on the above listed applicant(s). If applicant or co-applicant have given any false information, Landlord is entitled to reject the application, and retain all application fees as liquidated damages for Landlord's time and expenses in processing this application. Applicant must include a nonrefundable ap fee of \$ 50.

Signature of applicant _____ Date _____

Co-Applicant _____ Date _____

Signature of Landlord or Landlord's agent _____ Date _____

- **Return application with two months paycheck stubs for each adult and a drivers license via fax to 678-281-0532.**
- **\$50 ap fee at www.newhousealliance.com per adult. You may mail money order payable to Newhouse Alliance Group, PO Box 870523 Morrow, GA 30287. Include application with mailed payments.**



NEWHOUSE ALLIANCE GROUP LLC.
A REAL ESTATE SERVICES COMPANY

P.O. Box 870523 | Morrow, Ga 30287 | 404-981-5345 | Fax: 678-281-0532

Residency Verification Form

Applicant: _____

Applicant: _____

The above applicant has applied for occupancy at a rental property and has consented to verification of rental history. We would appreciate your assistance in assessing their rental history by asking you to complete the following. Please fax completed form to 678-281-0532.

TO BE COMPLETED BY LANDLORD:

1. Rental address: _____

2. Landlord/Manager: _____

3. Rental Period: FROM: _____ TO: _____

4. Number of Late Payments: 5-15 days _____ 16-30 days _____ Over 30 days _____

5. Did you have to file any warrants for eviction? _____

6. Did the tenant receive their deposit back? _____

7. Does the tenant owe outstanding balances? _____ How much? _____

8. Did the tenant cause any damages? _____

9. Did the tenant give proper notice? _____

10. Would you re-rent to the tenant? _____

11. Are you related to the tenant? _____

LANDLORD NAME: _____ TITLE: _____

Signature: _____ DATE: _____

Newhouse Alliance Group is authorized to investigate my rental application, obtain credit reports, acquire criminal background check, verify rental history and employment for review by management.

APPLICANT SIGNATURE: _____ DATE: _____

APPLICANT SIGNATURE: _____ DATE: _____