



RENTAL APPLICATION
WEB SITE WWW.MOBILEALRENTALS.COM
RENTAL DEPARTMENT DIRECT LINE 343-5241

PROPERTY MANAGER: JINGER LEVERETT
ADMIN ASSISTANT: DEBBIE SANDIFER
BOOK KEEPER: ANGELA REHWINKEL

LEASING AGENT: MAGGIE YOUNG
MAINTENANCE: JEANNE SEAMAN
LEASING AGENT: JO-ANN GASTON

DATE _____ BEST CONTACT NUMBER _____
PROPERTY YOU WISH TO RENT _____
RENT OFFERED _____ LENGTH OF LEASE _____ MOVE IN DATE _____

Please complete the application giving ALL of the pertinent details. If you need more room, please use additional paper. This information provides the basis for our selection of the best tenants for all of our properties. **Furthermore, any misrepresentation or omissions of facts requested can be basis for disapproval of this application. WE WILL NEED COPIES OF ALL DRIVERS LICENSES.**

APPLICANT 1 _____ BIRTH DATE _____ SS# _____
(LAST) (FIRST) (MIDDLE)
HM PHONE _____ WK PHONE _____ EMAIL _____
DRIVERS LIC#: _____ /ST _____

APPLICANT 2 _____ BIRTH DATE _____ SS# _____
(LAST) (FIRST) (MIDDLE)
HM PHONE _____ WK PHONE _____ EMAIL _____
DRIVERS LIC #: _____ /ST _____

MAIDEN NAME: **APPLICANT1** _____ **APPLICANT2** _____

APPLICANT 1 PRESENT ADDRESS _____
(CITY) (STATE) (ZIP)
PROPERTY OWNER(LANDLORD)S NAME _____ PHONE _____
RENTAL RATE OR MORTGAGE AMOUNT _____ HOW LONG OCCUPIED _____

APPLICANT 2 PRESENT ADDRESS _____
(CITY) (STATE) (ZIP)
PROPERTY OWNER(LANDLORD)S NAME _____ PHONE _____
RENTAL RATE OR MORTGAGE AMOUNT _____ HOW LONG OCCUPIED _____

If you have lived at the present address for less than two years, please give previous address and information:

APPLICANT 1 PREVIOUS ADDRESS _____
(CITY) (STATE) (ZIP)
OWNERS NAME _____ PHONE # _____
RENTAL RATE OR MORTGAGE AMOUNT _____ HOW LONG OCCUPIED _____

APPLICANT 2 PREVIOUS ADDRESS _____
(CITY) (STATE) (ZIP)
OWNERS NAME _____ PHONE # _____
RENTAL RATE OR MORTGAGE AMOUNT _____ HOW LONG OCCUPIED _____

LIST ANY OTHER OCCUPANTS THAT WILL BE LIVING IN THE PROPERTY, THEIR AGE , RELATIONSHIP AND SOCIAL SECURITY NUMBER.

LAST NAME	FIRST NAME	RELATION	BIRTH DATE	SS#
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

HOW MANY SMOKERS IN THE HOUSEHOLD? _____ HAVE YOU EVER BEEN EVICTED ? _____
HAVE YOU BEEN CONVICTED OF A FELONY? _____
IF YES TO EITHER EVICTION OR FELONY, PLEASE EXPLAIN _____

APPLICANT 1 EMPLOYER
NAME _____
ADDRESS _____
POSITION _____ PHONE NUMBER _____
HOW LONG _____ FAX NUMBER _____
SUPERVISOR _____ MONTHLY TAKE HOME _____

APPLICANT 2 EMPLOYER
NAME _____
ADDRESS _____
POSITION _____ PHONE NUMBER _____
HOW LONG _____ FAX NUMBER _____
SUPERVISOR _____ MONTHLY TAKE HOME _____

APPLICANT 1 OTHER SOURCE OF INCOME _____ **APPLICANT 2** OTHER SOURCE OF INCOME _____

PLEASE LIST INCOME-ONLY IF IT MAY BE VERIFIED BY OUR OFFICE.

IF YOU HAVE BEEN EMPLOYED FOR LESS THAN TWO YEARS PLEASE PROVIDE PREVIOUS EMPLOYMENT INFORMATION.

APPLICANT 1
 PREVIOUS EMPLOYER _____
 ADDRESS _____
 POSITION _____
 HOW LONG _____
 PHONE NUMBER _____
 MONTHLY TAKE HOME _____

APPLICANT 2
 PREVIOUS EMPLOYER _____
 ADDRESS _____
 POSITION _____
 HOW LONG _____
 PHONE NUMBER _____
 MONTHLY TAKE HOME _____

APPLICANT 1
 MAKE OF AUTO: _____ YEAR _____ TAG # _____ DRV LICENSE#/ST _____
APPLICANT 2
 MAKE OF AUTO: _____ YEAR _____ TAG # _____ DRV LICENSE #/ST _____

HOW MANY VEHICLES WILL BE PARKED AT THE PREMISES? _____
 DO YOU OWN BOATS OR TRAILERS THAT WILL BE PARKED AT THE PREMISES? _____ IF SO, HOW MANY AND WHAT TYPE? _____
VEHICLES WITHOUT A CURRENT TAG OR THAT WILL NOT RUN ARE NOT ALLOWED TO BE PARKED AT THE PREMISES.

DO YOU HAVE ANY PETS? YES _____ NO _____ HOW MANY _____ INSIDE/OUTSIDE? _____
 WHAT KIND AND/OR BREED? - _____

IN CASE OF EMERGENCY, WE MUST HAVE NAMES OF TWO RELATIVES WE CAN CONTACT.

APPLICANT 1
 NAME: _____
 ADDRESS: _____
 ADDRESS: _____
 RELATIONSHIP: _____
 AREA CODE/PHONE #: _____

APPLICANT 2
 NAME: _____
 ADDRESS: _____
 ADDRESS: _____
 RELATIONSHIP: _____
 AREA CODE/PHONE#: _____

NAME: _____
 ADDRESS: _____
 ADDRESS: _____
 RELATIONSHIP: _____
 AREA CODE/PHONE #: _____

NAME: _____
 ADDRESS: _____
 ADDRESS: _____
 RELATIONSHIP: _____
 AREA CODE/PHONE#: _____

This application is made for the express purpose of inducing the Owner to execute a lease agreement with the applicant. Applicant acknowledges that the below referenced fee carries certain limitations and conditions:

1. Non-interest bearing.
2. Non-refundable in that it will be used to cover the expense of taking and processing this application.
3. Applicant acknowledges that this application is subject to acceptance of Owner and execution of lease covering stated premises. **Therefore, signature of applicant authorizes credit and security checks necessary for approval of this application and purposes of collection.**
4. **Applicant acknowledges that signature authorizes verification of income, employment, and rental history.**

THIS APPLICATION IS RECEIVED WITHOUT RESPECT TO RACE, CREED, COLOR, SEX, OR NATIONAL ORIGIN.
 THIS IS AN EQUAL OPPORTUNITY HOUSING OFFICE.

****APPLICATION FEE IS SET AT \$50.00, FOR ADULT FAMILY MEMBERS****
 ADDITIONAL FEE REQUIRED FOR NON-FAMILY ADULT RESIDENT

When signed, this constitutes a binding agreement. Tenant herewith deposits \$ _____ in the form of _____, as evidence of good faith to be held by Berkshire Hathaway HomeServices Cooper & Co., Inc., in an escrow account. Upon approval of application deposit will be applied to the Damage Deposit. If these terms are not acceptable to owner or if application is not acceptable to owner, the deposit will be refunded in full. IN THE EVENT OF DEFAULT BY APPLICANT ALL DEPOSITS MADE HEREUNDER WILL BE FORFEITED AS LIQUIDATED DAMAGES AT OWNERS ELECTION.

Owner and Tenant understands that the Real Estate Agents and their company are not principals in this transaction and are not to be held liable for non-performance of this Agreement. The contents of this Agreement have been read by me and fully explained to me by the Real Estate Agent serving me in this transaction.

APPLICANT 1 _____ DATE _____

APPLICANT 2 _____ DATE _____
 (Please sign as you wish your name to appear on the lease).

AGENT: _____

**PROPERTY MUST BE PHYSICALLY SHOWN BY SIGNING AGENT.
 CERTIFIED FUNDS REQUIRED AT LEASE SIGNING**