

PINE MEADOW ESTATES

Phone @ 706-685-9292

LEASING APPLICATION

Equal Housing Opportunity Community

Application Date _____ Requested Move-in Date _____

PLEASE TELL US ABOUT YOURSELF

Applicant Full Name _____

Home Phone () _____ Cell Phone () _____

Date of Birth _____ Social Security _____

Driver's License # _____ State _____

Email Address: _____ (optional)

May we send text messages to you via cell phone? Yes
 No

If yes, cell number () _____

Co-Applicant Name _____

Co-Applicant Date of Birth _____ Social Security _____

Driver's License # _____ State _____

Email Address: _____ (optional)

Cell Number () _____

Names and birthdates of Dependents _____

Pet's names and type (cat/dog) _____

PLEASE GIVE RESIDENTIAL HISTORY (LAST 3 YEARS)

Current Address _____ Apt. # _____

City _____ State _____ Zip _____

Month/Year Moved In _____ Reason for Leaving _____

Mortgage/Rent per month \$ _____

Owner/Agent _____ Phone () _____

Previous Address(es) (last 3 years)

(Street) (Apt. #) (City, State, Zip) (Dates From/To)

(Street) (Apt. #) (City, State, Zip) (Dates From/To)

(Street) (Apt. #) (City, State, Zip) (Dates From/To)

PLEASE DESCRIBE YOUR CREDIT HISTORY

Have you declared bankruptcy in the past seven (7) years? Yes _____ No _____

Have you ever been evicted from a rental residence? Yes _____ No _____

Have you had two or more late rental payments in the past year? Yes _____ No _____

Have you ever willfully or intentionally refused to pay rent when due? Yes____ No____

PLEASE PROVIDE YOUR EMPLOYMENT INFORMATION

Applicant Status: ____ Full Time ____ Part Time ____ Student ____ Unemployed
Employer_____

Dates Employed_____ Position_____

Supervisor Name_____ Phone () _____

Salary \$_____ Per_____

(If employed by above less than 12 months, give name & phone of previous employer or school)_____

If you have other sources of income that you would like us to consider, please list income, source, and person (banker, employer, etc.) who we may contact for confirmation. You do not have to reveal alimony, child support, or spouse's annual income unless you want us to consider it in this application.

Amount \$_____ Per_____ Source/Contact Name_____

PLEASE LIST YOUR REFERENCES

Banking Accounts:

Name_____ Type of Account_____ Account #_____

Name_____ Type of Account_____ Account #_____

Personal Reference to Emergency Contact:

Name_____ Address_____

Phone () _____ Relationship _____

Cell Number () _____

Vehicle Information:

Make/Model _____ Year _____ License Plate _____

State _____

ADDITIONAL INFORMATION:

Where may we reach you to discuss this application?

Day Phone # () _____ Night Phone # () _____

Applicant(s) has submitted the sum of \$_____ (Application fee) with this application. Applicant(s) understands and agrees that this application shall not be considered by management until the application fee is paid. Applicant(s) understand and agree that the application fee is used by management for the payment of processing of this application. This includes costs for verifying the authenticity of the information provided and to obtain or otherwise procure information regarding applicants credit history, criminal background, and rental references. As such, applicant(s) understand and agree that the application fee is nonrefundable. Applicant(s) by signing this application for occupancy represent that the information provided herein is true and correct to the best of their knowledge. In the event that management discovers that any information provided herein is false, resident understands and agrees that management may, at management's sole option, reject this application and immediately rescind any current or future agreement with applicant(s).

By signing this application for occupancy the undersigned applicant(s) authorized management obtain a consumer credit report and any other information necessary in management's sole discretion to assist in the evaluation of this application for occupancy. Applicant(s) understand and agree that any such information obtained by management may include, but is not limited to, applicant's credit history, criminal record, evidence of any civil litigation and civil judgments, records of arrest, past rental history, salary information and history, vehicle records, driver's license records, driving history, and any other information. Applicant(s) release(s) management, its principals, investors, employees, agents, venders, the owner(s) of the community or property generally described in this application and any furnisher or supplier of information related to this application from any and all liability in the procurement, use, distribution, and possession of all obtained information. Applicant(s) also understand and agree that the information provided in this application may be provided to state, local, and/or federal government agencies.

X _____
Signature, Date and Printed Name

X _____
Signature, Date and Printed Name

How did you hear about us?

Did someone at Pine Meadow Estates refer you? If yes, who?

It is the policy of this community to rent to qualified persons regardless of race, color, religion, sex, national origin, handicap, or familial status, And in compliance of all Federal, State and Local laws.

Scan and/or Fax To: sales@pinemeadowestates.com
Fax: (706) 685-9299

Phone @ 706-685-9292