

APPLICATION FOR RENT

Proposed Move-In Date:	Address of Property:		
PRIMARY APPLICANT – INFORMATION			
Primary Applicant Name:		Telephone:	
Email Address:		Home:	
Social Security Number:		Driver's License Number:	Date of Birth:
Present Address:			
City:		State:	Zip:
How long have you lived at the present address?		Name of current landlord:	
Years: Months:	Telephone:		
How many people will be living in this home?		Do you have any pets at this time and/or are you planning to have pets live with you in this home?	
Number of Adults:		How many?	
Number of Children:		What kind?	
Current Employer:		Total Monthly Income:	How long have you been employed with this company?
Position:			Years: Months:
Telephone Number:			
CO-APPLICANT INFORMATION			
Name:		Telephone:	Total Monthly Income:
Social Security Number:		Driver's License:	Date of Birth:
GENERAL INFORMATION			
Have you or the co-applicant ever:			
<ul style="list-style-type: none"> • Filed for bankruptcy? • Been served an eviction notice or been asked to vacate a property you were renting? • Willfully or intentionally refused to pay rent when due? 			
How did you hear about this house? (Check all that apply):			
Drive by _____ Local Newspaper (Print) _____ Referral _____ Road Sign _____ RealRetals.com _____ Google Search _____ Rentals.com _____ RentalHomesPlus.com _____ AJC Classifieds _____ Yahoo Search _____ MSN/Bing _____ Craig's List _____ Other _____			

I/We declare the foregoing information is true and correct, and I/We hereby authorize you to conduct an employment, credit and background check and to verify our references and residential history.

Applicant's Signature: _____ **Date:** _____

Co-applicant's Signature: _____ **Date:** _____

RENTAL VERIFICATION

The individual signed below has submitted an application to:
Real Property Management Group, Inc. (DBA: AtlantaRentalProperty.com). Please
provide the information requested and fax this form back to our office at:
404-795-0464.

Thank you for your prompt response.

Name of Applicant _____

I hereby authorize release of the information requested below for my rental address at:

STREET CITY STATE ZIP

APPLICANT'S SIGNATURE

DATE

SECTION BELOW TO BE COMPLETED BY MANAGEMENT - APPLICANT SHOULD LEAVE SECTION BLANK

Dates of residency: _____ through _____

Amount of rent \$_____. Has Lease Expired? YES NO

of Late or NSF's: None 1 2 3 4 or more

(If 4 or more, did they occur within the last twelve months?) YES NO

Is the tenant current on all rent and fees as of today's date? YES NO

If not current, how much is owed? \$_____

Has the tenant complied with all community policies? YES NO

Does this individual keep an animal on the premises? YES NO

Has the animal caused a problem or been a nuisance? YES NO

Will the tenant be getting their full deposit back? YES NO

Is the tenant eligible for re-rental? YES NO

Name of Landlord Representative

Date