

# SCARBOROUGH PLACE APARTMENTS

RENTAL APPLICATION

345 RESEARCH DRIVE, UNIT 42, ATHENS, GA 30605

OFFICE 706-227-1326

NAME: \_\_\_\_\_ BIRTHDAY: \_\_\_\_\_ SSN: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

HOW DID YOU HERE ABOUT SCARBOROUGH PLACE? \_\_\_\_\_

PRESENT ADDRESS: \_\_\_\_\_ CITY/STATE/ZIP: \_\_\_\_\_

LANDLORDS NAME: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

HOW LONG AT THIS ADDRESS? \_\_\_\_\_

PREVIOUS ADDRESS: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

# OF PETS: \_\_\_\_\_ SIZE & TYPE: \_\_\_\_\_

NUMBER TO OCCUPY PROPERTY: \_\_\_\_\_

NAME OF PERSONS TO OCCUPY PROPERTY:

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

EMPLOYER: \_\_\_\_\_ SUPERVISOR: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ DATES EMPLOYED: FROM: \_\_\_\_\_ TO: \_\_\_\_\_

DRIVER'S LICENSE #: \_\_\_\_\_ STATE: \_\_\_\_\_

VEHICLE MAKE/MODEL: \_\_\_\_\_ YEAR: \_\_\_\_\_ TAG #: \_\_\_\_\_

HAS APPLICANT EVER BEEN EVICTED FRM TENANCY: YES \_\_\_\_\_ NO \_\_\_\_\_

IN CASE OF AN EMERGENCY, PLEASE NOTIFY:

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

APPLICANT UNDERSTANDS THAT THE EARNEST MONEY TO HOLD A UNIT IS ONLY REFUNDABLE IF THIS APPLICATION IS REJECTED BY THE MANAGEMENT COMPANY OR IF THE LEASE PROVISIONS ARE FULFILLED IN THEIR ENTIRETY. APPLICANT HEREBY CERTIFIES THAT ALL THE INFORMATION IN THIS APPLICATION IS TRUE AND CORECT. BY SIGNING THIS APPLICATION, APPLICANT HEREBY AUTHORIZES VERIFICATION OF ANY AND ALL INFORMATION SET FORTH ON THIS APPLICATION, AND RELEASED BY AUTORIZED ABOVE, WILL BE KEPT CONFIDENTIAL. APPLICANT UNDERSTANDS THAT FALSE STATEMENTS OR INFORMATION ARE PUNISIHABLE UNDER STATE AND FEDERAL LAW.

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_