

NAME: LAST _____ FIRST _____

J. Ray Realty

Application for Residential Rental

Every occupant over the age of 18 must fill out a separate application (even if married).

Primary applicant(s) **MUST** be 21 years of age or older. *Student Tenants* must have parent/guardian submit application.

Please fill out this form **COMPLETELY** and sign where indicated before returning.

PERSONAL INFORMATION

FIRST NAME	MIDDLE	LAST	SS# / /
DATE OF BIRTH / /	MARITAL STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED Since _____ <input type="checkbox"/> SEPERATED Since _____		DRIVERS LICENSE # State

CURRENT CONTACT INFORMATION

PHONE () - []H []C []W	PHONE () - []H []C []W	EMAIL
PRESENT PHYSICAL ADDRESS <input type="checkbox"/> rent <input type="checkbox"/> own	CITY / STATE / ZIP	
PRESENT MAILING ADDRESS <input type="checkbox"/> same as above	CITY / STATE / ZIP	

MOVING INFORMATION

LENGTH OF TIME AT CURRENT ADDRESS	REASON FOR LEAVING		
LANDLORD / MRTG CO.	LANDLORD / MRTG. CO. PHONE () -	PAYMENT / RENT AMT	RENT / PAYMENT UP TO DATE? <input type="checkbox"/> YES <input type="checkbox"/> NO

HOUSING HISTORY

PREVIOUS ADDRESS <input type="checkbox"/> rent <input type="checkbox"/> own	CITY / STATE / ZIP		
LENGTH OF TIME AT ADDRESS	REASON FOR LEAVING		
LANDLORD / MRTG CO.	LANDLORD / MRTG. CO. PHONE () -	PAYMENT / RENT AMT	RENT / PAYMENT UP TO DATE? <input type="checkbox"/> YES <input type="checkbox"/> NO

PREVIOUS ADDRESS <input type="checkbox"/> rent <input type="checkbox"/> own	CITY / STATE / ZIP		
LENGTH OF TIME AT ADDRESS	REASON FOR LEAVING		
LANDLORD / MRTG CO.	LANDLORD / MRT. CO. PHONE () -	PAYMENT / RENT AMT	RENT / PAYMENT UP TO DATE? <input type="checkbox"/> YES <input type="checkbox"/> NO

PROPOSED OCCUPANT(S) – including children

NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE

PROPOSED PET(S) - additional pet deposit(s) may apply

NAME	TYPE / BREED	<input type="checkbox"/> INDOOR <input type="checkbox"/> OUTDOOR	AGE
NAME	TYPE / BREED	<input type="checkbox"/> INDOOR <input type="checkbox"/> OUTDOOR	AGE

EMPLOYMENT INFORMATION

EMPLOYER	OCCUPATION	HOURS PER WEEK
SUPERVISOR	PHONE () - []H []C []W	YEARS EMPLOYED
ADDRESS		CITY / STATE / ZIP

INCOME / FINANCIAL INFORMATION

CURRENT INCOME \$ _____ . _____	PAID [] WEEKLY [] BIWEEKLY [] MONTHLY	SOURCE	PROOF OF INCOME [] YES [] NO
CURRENT INCOME \$ _____ . _____	PAID [] WEEKLY [] BIWEEKLY [] MONTHLY	SOURCE	PROOF OF INCOME [] YES [] NO
CURRENT INCOME \$ _____ . _____	PAID [] WEEKLY [] BIWEEKLY [] MONTHLY	SOURCE	PROOF OF INCOME [] YES [] NO

EMERGENCY / REFERENCE INFORMATION

EMERGENCY CONTACT	RELATIONSHIP	PHONE () - []H []C []W
EMERGENCY CONTACT	RELATIONSHIP	PHONE () - []H []C []W
PERSONAL REFERENCE	RELATIONSHIP	PHONE () - []H []C []W
PROFESSIONAL REFERENCE	RELATIONSHIP	PHONE () - []H []C []W

HOUSING PREFERENCES – please DO NOT simply put “any”

LOCATION	SCHOOL DISTRICT	[] IN TOWN [] OUTSIDE OF TOWN
# OF BEDROOMS	# OF BATHROOMS	RANGE OF PAYMENT
DATE NEEDED	LENGTH OF CONTRACT [] 6 MONTHS [] 12 MONTHS [] OTHER	

APPLICANT QUESTIONNAIRE / AUTHORIZATION

HAS APPLICANT EVER BEEN SUED FOR UNPAID BILLS?	[] YES [] NO	HAS APPLICANT EVER BEEN LOCKED OUT OF THEIR HOME / APARTMENT BY THE SHERIFF?	[] YES [] NO
HAS APPLICANT EVER BEEN BANKRUPT?	[] YES [] NO	HAS APPLICANT EVER BEEN BROUGHT TO COURT BY ANOTHER LANDLORD?	[] YES [] NO
HAS APPLICANT EVER BEEN FOUND GUILTY OF A FELONY?	[] YES [] NO	HAS APPLICANT EVER MOVED WHILE OWING RENT OR DAMAGED A RENTAL UNIT / HOME?	[] YES [] NO
HAS APPLICANT EVER BROKEN A LEASE?	[] YES [] NO	IS THE TOTAL MOVE- IN AMOUNT AVAILABLE NOW? (RENT AND DEPOSIT)	[] YES [] NO

Applicant authorizes the landlord to contact past and present landlords, employers, creditors, credit bureaus, neighbors and any other sources deemed necessary to investigate applicant.

All information is true, accurate and complete to the best of applicant’s knowledge. Landlord reserves the right to disqualify tenant if information is not as represented.

ANY PERSON OR FIRM IS AUTHORIZED TO RELEASE INFORMATION ABOUT THE UNDERSIGNED UPON PRESENTATION OF THIS FORM OR A PHOTOCOPY OF THIS FORM AT ANY TIME.

X _____ / _____ / _____
 APPLICANT SIGNATURE DATE

If you have any questions about the interpretation or legality of this form, please consult an attorney or other qualified person.

NOTES

Return completed applications to:

J Ray Realty
 101 Courthouse Square
 Whiteville, NC 28472

Fax:
 (910) 642-8113

eMail:
 JRayRealty@embarqmail.com