

RENTAL APPLICATION

JOHN SUAREZ & ASSOCIATES, LLC PROPERTY MANAGEMENT
4080 INDIAN TOWN ROAD, MARIETTA, GA 30066-2202
OFFICE: 770-591-0799 FAX: 770-591-7319

Property Address: _____ Date to Occupy: _____

Full Name: _____ SSN: _____ - _____ - _____ DOB: _____ EMAIL ADDRESS: _____ Full Name: _____ SSN: _____ - _____ - _____ DOB: _____ EMAIL ADDRESS: _____	CONTACT NUMBERS Home: (____) _____ - _____ Work: (____) _____ - _____ Cell: (____) _____ - _____ Other: (____) _____ - _____ Work: (____) _____ - _____ Cell: (____) _____ - _____ Other: (____) _____ - _____
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CURRENT RESIDENCE (To be completed by each applicant) Address _____ Apt No _____ City/State/Zip _____ Landlord Name _____ Landlord Phone (____) _____ - _____ Length of time @ present address: From _____ To _____ Monthly payment: \$ _____	PREVIOUS RESIDENCE _____ Apt No _____ _____ _____ (____) _____ - _____ From _____ To _____ Monthly payment: \$ _____
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CURRENT EMPLOYMENT (To be completed by each applicant) Company Name _____ Address _____ City/State/Zip _____ Supervisor Name _____ Contact# _____ Position _____ How Long From _____ To _____ Income \$ _____ per _____ Phone (____) _____ - _____	PREVIOUS EMPLOYMENT _____ _____ _____ _____ Contact# _____ _____ From _____ To _____ \$ _____ per _____ (____) _____ - _____
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ADDITIONAL OCCUPANTS		
Total number of people to occupy premises: _____		
Name	Relationship	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____

PETS	
Type/Breed(s): _____	Approx. weight at maturity of pet(s): _____
Type/Breed(s): _____	Approx. weight at maturity of pet(s): _____

OTHER INCOME

(List any other income that you wish to have considered as part of this application)

Source: _____ Monthly amount \$ _____

VEHICLE INFORMATION

Applicant Driver license #: _____ State: _____ Expires: _____

Co-Applicant Driver License#: _____ State: _____ Expires: _____

Number of vehicles including company cars, boats, RVs, etc. _____

Make: _____ Model: _____ Year: _____ Color: _____ Own/Lease/Finance Tag State _____ Lic. Number _____

Make: _____ Model: _____ Year: _____ Color: _____ Own/Lease/Finance Tag State _____ Lic. Number _____

Make: _____ Model: _____ Year: _____ Color: _____ Own/Lease/Finance Tag State _____ Lic. Number _____

EMERGENCY NOTIFICATION

In case of emergency please notify: _____ Telephone: () _____

Address: _____ Relationship: _____

In case of emergency please notify: _____ Telephone: () _____

Address: _____ Relationship: _____

PERSONAL REFERENCES

Name: _____ Telephone: () _____

Name: _____ Telephone: () _____

APPLICANT AGREES TO PAY A NON-REFUNDABLE APPLICATION FEE

\$ 40.00 for the first Applicant, \$ 25.00 for each additional applicant

Applicant has submitted the sum of \$ _____ which is a nonrefundable payment for a credit check and processing of this application by the Landlord.

Telephone number where you can be reached once this application has been processed: () _____

**How did you find out about this property: _____

TERMS AND CONDITIONS

For consideration of the rental property outlined on page one, a security deposit of \$ _____ has been secured. Owner agrees to take this property off the market once this application is approved. If I do not qualify under Owner's qualifications for residency, I understand this security deposit will be refunded. If I follow through and lease the property, this deposit shall be my security deposit. I understand that if I do not take occupancy after being approved, this security deposit shall be forfeited.

AGREEMENT & RELEASE AUTHORIZATION

I certify that the information given is complete and correct. The Landlord or his agent is hereby expressly authorized to verify the accuracy and correctness of these statements, to communicate with my present and former employers, creditors and landlords, and to procure such other information (including credit reports) which the Landlord may require to evaluate this application. I understand that additional resources may be used to verify this application and I release all parties from liability for damages for issuing such information in good faith.

Applicant's Signature: _____ Date: _____

CO-APPLICANT Signature: _____ Date: _____