

A \$_____ non-refundable application fee is required for investigation.

Instructions: A separate application must be filled out by each applicant (even if married). Completely fill out each blank and sign where indicated.

PERSONAL

APPLICANT _____

MARITAL STATUS: ☐ Single ☐ Married since (date) _____ ☐ Divorced since (date) _____ Former Spouse _____
 BIRTH DATE: _____ SS# _____ DRIVERS LICENSE State Issued by _____ # _____

ADDRESSES

Present Address _____ City/State/Zip _____ Since _____ Rent/ Month _____ Present Phone (____) _____
 Present Landlord _____ Address _____ City/State/Zip _____ Phone (____) _____
 Is present rent up to date? ☐ Yes ☐ No Have you given notice? ☐ Yes ☐ No Have you been asked to leave? ☐ Yes ☐ No

Previous Address _____ City/State/Zip _____ Since _____ Rent/ Month _____ Present Phone (____) _____
 Previous Landlord _____ Address _____ City/State/Zip _____ Phone (____) _____
 Was rent up to date? ☐ Yes ☐ No Had you given notice? ☐ Yes ☐ No Had you been asked to leave? ☐ Yes ☐ No

Next Previous Address _____ City/State/Zip _____ Since _____ Rent/ Month _____ Present Phone (____) _____
 Next Previous Landlord _____ Address _____ City/State/Zip _____ Phone (____) _____
 Was rent up to date? ☐ Yes ☐ No Have you given notice? ☐ Yes ☐ No Have you been asked to leave? ☐ Yes ☐ No

OCCUPANTS

Number to occupy _____

NAME	RELATIONSHIP	BIRTH DATE

PETS: ☐ Yes ☐ No If yes, give details (number, type & size) **NO PETS**

CARS

Make/Model/color #1 _____ State _____ Lien Holder #1 _____ Make/Model/color #2 _____ State _____ Lien License Plate #1 _____ License Plate #2 _____ Holder #2 _____

EMPLOYMENT (Parent info if Student)

EMPLOYER _____ Since _____ EMPLOYER _____ PREVIOUS _____ Since _____
 Street/City _____ Street/City _____
 What do you do? _____ What did you do? _____
 Supervisor _____ Wrk Hrs. _____ Phone (____) _____ Supervisor _____ Wrk Hrs. _____ Phone (____) _____

INCOME (Parent and student info if student)

Current Income \$ _____ Weekly/Biweekly/Monthly/Yearly Source _____
 Current Income \$ _____ Weekly/Biweekly/Monthly/Yearly Source _____
 Current Income \$ _____ Weekly/Biweekly/Monthly/Yearly Source _____
 Bank/Credit Union _____ Acct.# _____ Bank/Credit Union _____ Acct.# _____

REFERENCE

Relative _____ Relation _____ Non-Relative
Address _____ Phone (____) _____ Reference _____ Phone (____) _____
Address _____ Phone (____) _____ Address _____
Non-Relative Emergency
Reference _____ Phone (____) _____ Contact _____ Phone (____) _____

CREDIT ACCOUNTS (Parent info if student)

Current (open) include Credit Card(s) CREDITORS NAME	ADDRESS	ACCOUNT #	PAYMENT	CURRENT
_____	_____	_____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	\$ _____	<input type="checkbox"/> Yes <input type="checkbox"/> No

Explain any "YES" answers on back with names and details.

Has any signer ever been sued for bills? <input type="checkbox"/> Yes <input type="checkbox"/> No	Has any signer ever been sued for eviction? <input type="checkbox"/> Yes <input type="checkbox"/> No
Has any signer ever been bankrupt? <input type="checkbox"/> Yes <input type="checkbox"/> No	Has any signer ever been guilty of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No
Has any signer ever broken a lease? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is the total move-in amount available now (rent and deposit)? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name in which utilities are now billed and account number _____ # _____	

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

All the information is true, accurate and complete to the best of applicant's knowledge. Owner 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 DATE

DO NOT WRITE BELOW THIS LINE THIS SECTION TO BE COMPLETED BY INTERVIEWER			
Credit Report: (Favorable/Unfavorable) By: _____			
Other Comments: _____			
Deposit: _____ Option _____ Monthly Rent _____			
Unit Applied For: _____			
Terms of Lease _____ Months _____			
Move-in Date _____ Lease Expires _____ Num. Keys _____			
Total Number of Occupants _____			
Separate Pet Deposit _____			
Utilities to be paid by tenants Gas <input type="checkbox"/> Electric <input type="checkbox"/> Water <input type="checkbox"/>			

If you have a question about the interpretation or legality of this form please consult an attorney or other qualified person.

Mail completed application to:
Real Estate Associates of Alabama, Inc., P.O. Box 916
Troy, AL 36081
or Fax to: 334-566-6636
or [Email: dianng@troycable.net](mailto:dianng@troycable.net)