

RENTAL APPLICATION

Mozingo Real Estate & Auction, Inc. 549 East Pass Road, Suite D, Gulfport, MS 39507

228-896-3400 (Phone) * 228 896 1927 (Fax) * jmozingo3@gmail.com (E-mail)

The undersigned hereby makes an application to rent the following property:

_____.

Move-in date of _____ Monthly rent of \$_____ security deposit of \$_____

Applicant Name

Applicant Phone No(s). Home: _____ Cell: _____ Work: _____

Applicant Date of Birth _____ S.S. # _____

Applicant Employer _____ Income _____

Employer Address _____

Employer Phone No. _____

Co-Applicant / Spouse Name

Co-Applicant / Spouse Phone No(s). Home: _____ Cell: _____ Work: _____

Co-Applicant / Spouse Date of Birth _____ S.S. # _____

Co-Applicant / Spouse Employer: _____

Employer Address _____ Income _____

Employer Phone No. _____

List all **Occupants** (including their ages) that will reside at above residence _____

List all **Pets** _____

PLEASE GIVE RESIDENTIAL HISTORY (LAST 3 YEARS)

Current Address _____ Apt# _____

City _____ State _____ Zip _____

Month/Year Moved In _____ Rent \$ _____

Reasons for Leaving _____

Owner/Agent _____ Phone () _____

Previous Address (last 3 years) _____ Rent \$ _____

Owner/Agent _____ Phone () _____

PLEASE DESCRIBE YOUR CREDIT HISTORY

Have you declared bankruptcy in the past seven (7) years? Yes _____ No _____

Have you ever been evicted or requested to vacate a residence? Yes _____ No _____

Have you had two or more late rental payments in the past year? Yes _____ No _____

Have you ever willfully or intentionally refused to pay rent when due? Yes _____ No _____

Has your pay ever been garnished? Yes _____ No _____

Have you ever been convicted of a felony? Yes _____ No _____

CREDIT REFERNCES

Credit Card Accounts / Loans:

Name _____	Amt. Owed _____	Monthly Payments _____
Name _____	Amt. Owed _____	Monthly Payments _____
Name _____	Amt. Owed _____	Monthly Payments _____
Name _____	Amt. Owed _____	Monthly Payments _____
Name _____	Amt. Owed _____	Monthly Payments _____

PLEASE LIST YOUR REFERENCES

Banking Accounts:

Name _____	Type of Account _____
Name _____	Type of Account _____
Name _____	Type of Account _____
Name _____	Type of Account _____

Personal Reference or Emergency Contact:

Name _____ Relationship _____
 Address _____
 Phone(s) _____

Driver's License:

Applicant's Driver's License Number _____ State _____
 Co-Applicant / Spouse's License Number _____ State _____

Vehicle(s) Information (please list all vehicles that will be parked at above address):

Make / Model _____	Year _____	License Plate No. _____
Make / Model _____	Year _____	License Plate No. _____
Make / Model _____	Year _____	License Plate No. _____
Make / Model _____	Year _____	License Plate No. _____

ADDITIONAL INFORMATION:

Please give any additional information that might help owner/management evaluate this application?

I hereby apply to lease the above described premises for the term above set forth and agree that the rental is to be payable the first day of each month in advance. As an inducement to the owner of the property and to the agent to accept this application, I warrant that all statements above set forth are true; however, should any statement made above be a misrepresentation or not a true statement of facts, all of the deposit will be retained to offset the agent's cost, time, and effort in processing my application.

I hereby deposit \$_____ as earnest money to be refunded to me if this application is not accepted in three (3) business days. Upon acceptance, this deposit shall be retained as part of the security deposit. When so approved and accepted, I agree to execute a lease for _____ months before possession is given and to pay the balance of the security deposit prior to the move in date.

If any deposits were made at the time of application, and if above balance due is not paid by above date of occupancy then the deposit will be forfeited as compensation for expenses incurred in removing the premises from the rental market.

If the application is not approved or accepted by the owner or agent, the deposit will be refunded, the application hereby waiving any claim for damages by reason of non-acceptance which the owner or agent may reject. I recognize that as a part of your procedure for processing my application, an investigative consumer report may be prepared whereby information is obtained through personal interviews with others with whom I may be acquainted. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living.

APPLICANT SIGNATURE

CO-APPLICANT / SPOUSE SIGNATURE

DATE

DATE

**AUTHORIZATION
Release of Information**

I authorize an investigation of my credit, tenant history, banking and employment for the purposes of renting a house, apartment, or condominium from this owner/manager.

Name (please print)

X _____
Signature

Date

**AUTHORIZATION
Release of Information**

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Name (please print)

X _____
Signature

Date

APPLICANT: PLEASE DO NOT WRITE BELOW (FOR OFFICE USE ONLY)

Accepted by Management on _____

AMOUNT

DATE PAID

Rent Proration: \$ _____

Security Deposit: \$ _____

Pet Deposit: \$ _____

OFFICE NOTES: