

1100 Peachtree Street, Suite 200, Atlanta, GA 30309

Phone: (404)847-1267 Fax: (678) 669-1968



Rental Application and Information Release Form

ADDRESS OF RESIDENCE FOR WHICH YOU ARE APPLYING: _____

APPLICANT'S NAME _____
 SOCIAL SECURITY # _____ BIRTHDAY _____ DRIVERS LIC.# _____ STATE _____
 PRESENT ADDRESS _____
 PHONE # _____ EMAIL(won't be shared): _____
 LANDLORD'S NAME _____ LANDLORD'S PHONE # (_____) _____

2nd APPLICANT'S NAME _____
 SOCIAL SECURITY # _____ BIRTHDAY _____ DRIVERS LIC.# _____ STATE _____
 PRESENT ADDRESS _____
 PHONE # _____ EMAIL(won't be shared): _____
 LANDLORD'S NAME _____ LANDLORD'S PHONE # (_____) _____

ADDRESS WHERE YOU PAY RENT _____ WHAT MONTH
 & YEAR DID YOU MOVE IN? _____ HOW MUCH IS YOUR CURRENT/PREVIOUS RENT? \$ _____

PREVIOUS ADDRESS(if less than 12 months at current address)
 STREET _____ CITY _____ STATE _____
 ZIP _____ PREVIOUS LANDLORD'S NAME _____ PHONE # _____

EMPLOYMENT REFERENCES:

1st APPLICANT'S EMPLOYER _____
 EMPLOYER'S ADDRESS _____ PHONE # _____
 LENGTH OF TIME EMPLOYED _____ YRS. _____ MONTHS, POSITION _____
 MONTHLY INCOME \$ _____ ANY ADDITIONAL INCOME \$ _____

2nd APPLICANT'S EMPLOYER _____
 EMPLOYER'S ADDRESS _____ PHONE # _____
 LENGTH OF TIME EMPLOYED _____ YRS. _____ MONTHS, POSITION _____
 MONTHLY INCOME \$ _____ ANY ADDITIONAL INCOME \$ _____

BANKING REFERENCES:

TENANT 1 BANK NAME (CHECKING/ACCT.) _____ ACCT.# _____

TENANT 2 BANK NAME (CHECKING/ACCT.) _____ ACCT.# _____

NAMES OF PEOPLE WHO WILL BE LIVING AT THIS ADDRESS, OTHER THAN APPLICANTS

NAME _____ RELATIONSHIP _____

NAME _____ RELATIONSHIP _____

NAME _____ RELATIONSHIP _____

NAME _____ RELATIONSHIP _____

DO YOU HAVE ANY PETS? IF YES, LIST ALL PETS WITH DESCRIPTIONS _____

IN CASE OF EMERGENCY CONTACT (ATTACH AN EXTRA SHEET IF MORE THAN ONE CONTACT):

NAME _____ PHONE # (____) _____

ADDRESS _____ RELATIONSHIP _____

HAVE YOU EVER BEEN CONVICTED OF A [] FELONY, [] MISDEMEANOR? If yes explain(ATTACH ADDITIONAL PAGES IF NECESSARY): _____

HAVE YOU EVER GONE THROUGH BANKRUPTCY, BEEN EVICTED, HAD ANY JUDGEMENTS, CREDITORS OR OTHER LEGAL PROCEEDING AGAINST YOU? _____

IF yes, explain: _____

A NON-REFUNDABLE APPLICATION FEE OF \$85.00 PER PERSON IS DUE AT THE TIME THIS RENTAL APPLICATION IS FILLED OUT. PAYMENT OF THE APPLICATION FEE DOES NOT GURANTEE OR IMPLY APPROVAL OF THE RENTAL APPLLICATION OR LEASING AGREEMENT.

INFORMATION RELEASE FORM

I/we hereby authorize Atlantic-West Property Company and/or any Credit Information Services to obtain information concerning my past credit, and/or tenant-landlord history now or anytime in the future. I hereby authorize any of the following sources, including but not limited to landlords, public or privately owned utilities, current or past creditors, governmental housing agencies, and/or other credit reporting agencies to release any information to Atlantic-West Group and affiliates or any Credit Information Service concerning my/our past credit and/or tenant-landlord history. I hereby release any of the above sources, their officers, agents, or employees from any liability for damages of whatsoever kind or nature whether caused by negligence or otherwise which may at any time result to me/us by reason of compliance with the above mentioned inquiry which may include the answering of specific questions and the giving of any information concerning my/our past records.

APPLICANT 1 SIGNATURE

DATE

APPLICANT 2 SIGNATURE

DATE