

## CHECKLIST FOR A COMPLETE APPLICATION

- Complete **ALL** information on application
- **ALL Applicants 18 years of age or older MUST fill out an application.** Under 18 Will be listed as other occupants.
- Make sure **ALL** applicants and co-applicants SIGN and date application
- Copy of valid drivers license and a copy of social security card (if Approved)
- **Attach last 2 MONTHS CHECK STUBS OF ALL WORKING APPLICANTS ARE REQUIRED.**
- **\$1.00 Per copy if you need copies made**
- Proof of any other income for household - Please attach proof
- **\$40.00 money order application PER APPLICANT.**
- **fee REQUIRED**
- **\$150 Administration fee (If approved)**

**YOUR APPLICATION WILL NOT BE  
CONSIDERED IF INCOMPLETE!!**

**THANK YOU**

**MANAGEMENT**



1697 VERNON ROAD, SUITE C, LAGRANGE, GEORGIA  
(706) 882-0214

# Lease/Purchase Application

Property Address Applying For		
Address:		
Today's date:		
Section 8 qualified?: Yes	No	Amount: \$
<input type="checkbox"/>	<input type="checkbox"/>	

## Applicant Information

Applicant Personal Information		
Full name:		Email:
Your Current address:		
Date of birth:	SSN#	Driver's license#
Cell phone: ( ) <input type="checkbox"/> <input type="checkbox"/>	Home phone: ( ) <input type="checkbox"/> <input type="checkbox"/>	Additional phone: ( )
Marital status: Single Married Separated Divorced Widowed		
List pets you have or will have:		Date you would like to move in:
Applicant Vehicle Information		
Car Make:	Year:	Color:
License Plate No.:	State:	
Residential History		
Name of current landlord:		Phone: ( )
Current address: <input type="checkbox"/> <input type="checkbox"/>		
City:	State:	ZIP Code: <input type="checkbox"/> <input type="checkbox"/>
Monthly payment or rent: \$	Paid rent by due date?: Yes No	Resided there how long? <input type="checkbox"/> <input type="checkbox"/>
Reason for leaving: <input type="checkbox"/> <input type="checkbox"/>	Was rent paid in full upon departure?: Yes No <input type="checkbox"/> <input type="checkbox"/>	
Did you provide a 30-day notice before leaving?: Yes No	Have you ever been served a late rent notice?: Yes No	
Were dispossession/eviction proceedings initiated?: Yes No	Have you been evicted in the past?: Yes No	
Name of previous landlord:		Phone: ( )
Previous address: <input type="checkbox"/> <input type="checkbox"/>		
City:	State:	ZIP Code: <input type="checkbox"/> <input type="checkbox"/>
Monthly payment or rent: \$	Paid rent by due date?: Yes No	Resided there how long? <input type="checkbox"/> <input type="checkbox"/>
Reason for leaving: <input type="checkbox"/> <input type="checkbox"/>	Was rent paid in full upon departure?: Yes No <input type="checkbox"/> <input type="checkbox"/>	
Did you provide a 30-day notice before leaving?: Yes No	Have you ever been served a late rent notice?: Yes No	
Were dispossession/eviction proceedings initiated?: Yes No	Have you been evicted in the past?: Yes No	
Employment History		
Current employer:		Phone:
Employer address: <input type="checkbox"/> <input type="checkbox"/>		How long employed?
City:	State:	ZIP Code:
Position:	Hourly Salary	Weekly net income: \$
Previous employer:		Phone:
Employer address: <input type="checkbox"/> <input type="checkbox"/>		How long employed?
City:	State:	ZIP Code:
Position:	Hourly Salary	Weekly net income: \$
All Other Proposed Occupants		
Name:	Relationship:	Age:
Name:	Relationship:	Age:
Name:	Relationship:	Age:
Name:	Relationship:	Age:

<b>Emergency Contact</b>			
Name of a person not residing with you:			
Address:			
City:	State:	ZIP Code:	Phone: ( )
Relationship:			
<b>Character References (Not related to you)</b>			
Name:	Address:	Phone: ( )	
Name:	Address:	Phone: ( )	
Name:	Address:	Phone: ( )	
<b>Applicant Credit History</b>			
Checking account institution name:		Balance on deposit: \$	
Savings account institution name:		Balance on deposit: \$	
Other monetary assets:		Balance on deposit: \$	
<b>Total monetary assets:</b>			
Credit card:		Balance owed: \$	
Auto loan institution name:		Balance owed: \$	
Additional debts and obligations:		Balance owed: \$	
<b>Total debt:</b>			
Have you ever filed for bankruptcy? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, when?			
*All monetary assets and loans must be provided. If additional space is needed, please write on back.			

## Co-applicant Information

<b>Co-applicant Personal Information</b>			
Full name:		email:	
Your Current address:			
Date of birth:	SSN#	Driver's license No.:	
Cell phone: ( ) <input type="checkbox"/>	Home phone: ( ) <input type="checkbox"/>	Additional phone: ( )	
Marital status: Single    Married    Separated    Divorced    Widowed			
List pets you will have:		Date you would like to move in:	
<b>Co-applicant Vehicle Information</b>			
Car Make:	Year:	Color:	
License Plate No.:	State:		
<b>Residential History</b>			
Name of current landlord:		Phone: ( )	
Current address:			
City:	State: <input type="checkbox"/>	ZIP Code:	
Monthly payment or rent: \$	Paid rent by due date?: Yes    No	Resided there how long? <input type="checkbox"/>	
Reason for leaving: <input type="checkbox"/>	Was rent paid in full upon departure?: Yes    No <input type="checkbox"/>		
Did you provide a 30-day notice before leaving?: Yes <input type="checkbox"/> No <input type="checkbox"/>	Have you ever been served a late rent notice?: Yes <input type="checkbox"/> No		
Were dispossession/eviction proceedings initiated?: Yes    No	Have you been evicted in the past?: Yes    No		
Name of previous landlord:		Phone: ( )	
Previous address:			
City:	State: <input type="checkbox"/>	ZIP Code:	
Monthly payment or rent: \$	Paid rent by due date?: Yes    No	Resided there how long? <input type="checkbox"/>	
Reason for leaving: <input type="checkbox"/>	Was rent paid in full upon departure?: Yes    No <input type="checkbox"/>		
Did you provide a 30-day notice before leaving?: Yes <input type="checkbox"/> No <input type="checkbox"/>	Have you ever been served a late rent notice?: Yes <input type="checkbox"/> No		
Were dispossession/eviction proceedings initiated?: Yes    No	Have you been evicted in the past?: Yes    No		

Employment History			
Current employer:		Phone:	
Employer address:		How long employed?	
City:	State:	ZIP Code:	
Position:	Hourly <input type="checkbox"/>	Salary <input type="checkbox"/>	Weekly net income: \$
Previous employer:		Phone:	
Employer address:		How long employed?	
City:	State:	ZIP Code:	
Position:	Hourly <input type="checkbox"/>	Salary <input type="checkbox"/>	Weekly net income: \$
Emergency Contact			
Name of a person not residing with you:			
Address:			
City:	State:	ZIP Code:	Phone:
Relationship:			
Character References (Not related to you)			
Name:	Address:	Phone: (    )	
Name:	Address:	Phone: (    )	
Name:	Address:	Phone: (    )	
Co-applicant Credit History			
Checking account institution name & account no:		Balance on deposit: \$	
Savings account institution name & account no:		Balance on deposit: \$	
Other monetary assets:		Balance on deposit: \$	
<b>Total monetary assets:</b>			
Credit card:		Balance owed: \$	
Auto loan institution name:		Balance owed: \$	
Additional debts and obligations:		Balance owed: \$	
<b>Total debt:</b>			
Have you ever filed for bankruptcy? Yes    No    If yes, when?			
*All monetary assets and loans must be provided. If additional space is needed, please write on back.			

Your application MUST BE SIGNED on the NEXT PAGE by all Parties 18 years or older and you must be listed as an applicant. You must have all information completed for verification – please see our check list attached. ANY applications that are NOT completed and information NOT attached will NOT be processed.

**PLEASE DO NOT CALL THE OFFICE FOR THE STATUS of your application.**

Once your application is processed our Property Coordinator will contact you if your application is approved!

THANK YOU – Management

GENERAL INFORMATION

- Security deposit determined with application
- Application fee due upon receipt of application
- Accept money orders only
- Incomplete application will automatically be rejected
- Tenants are responsible for pest control
- Proof of employment (pay stubs)
- Copy of driver's license
- Renters insurance is required
- Pets may or may not be allowed in residence
- Pet fee determined with application
- Require 30-day notice upon departure
- Rent due on 1st of each month.

### Agreement & Authorization Signature

The foregoing statements I have provided are true and correct. I hereby authorize a credit and/or criminal check to be made, verification of information provided, and communication with any and all names listed on this application. I understand that any discrepancy or lack of information may result in the rejection of this application; or if approved, eviction. I understand that there is a nonrefundable application fee to cover the cost of processing my application and I am not entitled to a refund, even if I am not approved.

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name \_\_\_\_\_

Signature of co-applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name \_\_\_\_\_

### APPLICANT DO NOT WRITE BELOW – OFFICE USE ONLY

<b>OFFICE USE ONLY: McKeen Realty</b>	
Approved by: _____	Money order No# _____

<b>FAX to:</b> _____	<b>ATTN:</b> _____
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<p style="text-align: center;"><b>Employment Verification for housing</b></p> <p>Name: _____</p> <p>D/O/B _____</p> <p>SSN# _____</p> <p>How long employed? _____</p> <p>Position? _____</p> <p>Pay Rate? _____</p> <p>Full time? _____</p>
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<p style="text-align: center;"><b>Tenant's Residency Verification</b></p> <p>Tenants _____</p> <p>Address _____</p> <p>How long did they live there? _____</p> <p>Amount of Rent? _____</p> <p>Names on Lease? _____</p> <p>_____</p> <p>Did they finish their lease? _____</p> <p>Did they pay their rent timely? _____</p> <p>Did you ever file a dispossessory? _____</p> <p>If month to month, if required, have they Given 30 day notice? _____</p> <p>If already moved out was residence left in Same condition as moved in to? _____</p>
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<p>Other disclosure _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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<b>Please fax back to 1-888-389-7215 – Thank you for your assistance!!</b>
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