

GULL ISLE REALTY RENTALS

Rental Application

THE UNDERSIGNED MAKES APPLICATION TO RENT PROPERTY _____
BEGINNING ON ____/____/____ WITH THE MONTHLY RENTAL AMOUNT \$ _____
MONTH DAY YEAR

APPLICANT'S PERSONAL INFORMATION

FULL NAME _____ PHONE (____) ____ - ____
FIRST MIDDLE LAST

DATE OF BIRTH ____/____/____ SOCIAL SECURITY # ____ - ____ - ____
MONTH DAY YEAR

NAME OF CO-APPLICANT _____ AGE OF CO-APPLICANT _____
FIRST MIDDLE LAST

OTHER OCCUPANTS AND RELATIONSHIP:

NAME _____ RELATIONSHIP _____
NAME _____ RELATIONSHIP _____
NAME _____ RELATIONSHIP _____

DO YOU HAVE ANY ANIMALS? YES NO IF YES, WHAT KIND? _____

HISTORY OF RESIDENCY

CURRENT ADDRESS _____
STREET ADDRESS CITY STATE ZIP CODE

MOVED IN ____/____/____ MOVED OUT ____/____/____ REASON FOR LEAVING _____
M Y M Y

OWNER/AGENT _____ PHONE (____) ____ - ____

PREVIOUS ADDRESS (WITHIN 3 YEARS) _____
STREET ADDRESS CITY STATE ZIP CODE

MOVED IN ____/____/____ MOVED OUT ____/____/____ REASON FOR LEAVING _____
M Y M Y

OWNER/AGENT _____ PHONE (____) ____ - ____

PREVIOUS ADDRESS (WITHIN 3 YEARS) _____
STREET ADDRESS CITY STATE ZIP CODE

MOVED IN ____/____/____ MOVED OUT ____/____/____ REASON FOR LEAVING _____
M Y M Y

OWNER/AGENT _____ PHONE (____) ____ - ____

EMPLOYMENT INFORMATION

EMPLOYMENT STATUS: EMPLOYED FULL-TIME EMPLOYED PART-TIME STUDENT RETIRED UNEMPLOYED

EMPLOYER _____ POSITION _____ STARTING DATE ____/____/____
M Y

SUPERVISOR _____ SUPERVISOR'S PHONE (____) ____ - ____

ADDRESS _____ HOURLY OR SALARY WAGE AMOUNT \$ _____

EMPLOYMENT STATUS: EMPLOYED FULL-TIME EMPLOYED PART-TIME STUDENT RETIRED UNEMPLOYED

EMPLOYER _____ POSITION _____ STARTING DATE ____/____/____
M Y

SUPERVISOR _____ SUPERVISOR'S PHONE (____) ____ - ____

ADDRESS _____ HOURLY OR SALARY WAGE AMOUNT \$ _____

IF THERE ARE OTHER SOURCES OF INCOME YOU WOULD LIKE US TO CONSIDER, PLEASE LIST INCOME, SOURCE, PERSON, PHONE #, WHO WE COULD CONTACT FOR CONFIRMATION, YOU DO NOT HAVE TO REVEAL ALIMONY, CHILD SUPPORT, OR SPOUSE'S ANNUAL INCOME UNLESS YOU WANT US TO CONSIDER IT IN THE APPLICATION

INCOME \$ _____ SOURCE _____ CONTACT _____ PHONE (____) ____ - ____

VEHICLE INFORMATION

DRIVER'S LICENSE # _____ STATE _____ ISSUED DATE _____ / _____ / _____
MONTH DAY YEAR

VEHICLE MAKE & MODEL _____ YEAR _____ TAG # _____ STATE _____

2ND VEHICLE (IF APPLICABLE):

VEHICLE MAKE & MODEL _____ YEAR _____ TAG # _____ STATE _____

PAYMENT HISTORY

HAVE YOU EVER FILED FOR BANKRUPTCY? YES NO

IF YES, WHAT YEAR? _____ / _____
M Y

HAVE YOU EVER BEEN EVICTED? YES NO

IF YES, EXPLAIN _____

HAVE YOU EVER WILLFULLY OR INTENTIONALLY REFUSED TO PAY WHEN DUE? YES NO

IF YES, EXPLAIN _____

ADDITIONAL INFORMATION

PLEASE PROVIDE ANY ADDITIONAL INFORMATION YOU WOULD HELP US EVALUATE THIS APPLICATION

PROFESSIONAL REFERENCES

NO FRIENDS OR FAMILY MEMBERS PLEASE

NAME _____ RELATIONSHIP _____ PHONE (_____) _____ - _____
FIRST LAST

NAME _____ RELATIONSHIP _____ PHONE (_____) _____ - _____
FIRST LAST

DEPOSIT

I hereby apply to lease the above described premises for the term and upon the conditions above set forth and agree that the rental is to be payable the 1st 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, \$15.00 of the deposit will be retained to offset the agent's cost, time, and effort in processing my application.

I hereby deposit \$ _____ (equivalent to 1 month's rent) as earnest money to be refunded to me if this application is not accepted within 3 business banking days. Upon acceptance of this application, this deposit shall be retained as the security deposit. When so approved and accepted I agree to execute a lease for 12 months before possession is given and to pay in full a security deposit in the amount of one month's rent within 24 hours of acceptance, and pro-rated rent within 15 days of acceptance or be held responsible for remaining rent due for that month. I also agree, should I change my mind, pro-rated rent will be deducted from my deposit before it is refunded to me as liquidated damages and loss of rent in payment for the agent's time and effort in processing my inquiry and application, including making necessary investigation of my credit, character, and reputation. If this application is not approved and accepted by the owner or agent, the deposit will be refunded, the applicant hereby waiving any claim for damages by reason of non-acceptance which the owner or his agent may reject without any reason for doing so.

Requested By:

GULL ISLE REALTY RENTALS

611 Atlantic Beach Causeway

Atlantic Beach, NC 28512

www.gullislerealty.com

252-726-7679

APPLICANT'S APPROVAL STATEMENT FOR INQUIRY

I RECOGNIZE THAT AS A PART OF YOUR PROCEDURE FOR PROCESSING MY APPLICATION, AN INVESTIGATIVE CONSUMER REPORT MAYBE PREPARED WHEREBY INFORMATION IS OBTAINED THROUGH PERSONAL INTERVIEWS WITH MY NEIGHBORS, FRIENDS, AND OTHERS WHOM I MAY BE ACQUAINTED. THIS INQUIRY INCLUDES INFORMATION AS TO MY CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS, AND MODE OF LIVING. I UNDERSTAND THAT I MAY HAVE THE RIGHT TO MAKE A WRITTEN REQUEST WITHIN A REASONABLE PERIOD OF TIME TO RECEIVE ADDITIONAL, DETAILED INFORMATION ABOUT THE NATURE AND SCOPE OF THIS INVESTIGATION.

The above information, to the best of my knowledge, is true and correct.

SIGNATURE OF APPLICANT

_____/_____/_____
MONTH

DAY

YEAR