

Thomasville Apartments Application

2340 East Pass Road · Gulfport, MS 39507 · (228)-897-7684

Unit Applied for: # _____	App Fee: \$ _____	Rent Amount: \$ _____
Deposit Amount: \$ _____	Pet Fee: \$ _____	Estimated Move in Date: _____
Lease Type: [12 months]	Preferred Move in Date: _____	

Applicant's Information

Last Name: _____ First: _____ MI: _____

Social Security #: _____ D.O.B.: _____

Driver's License #: _____ State: _____

Cell Phone #: _____ Work #: _____

Email: _____

Please list all others whom will be residing with you (full name, age and relationship) _____

Emergency Contacts

Name of emergency contact: _____ Relationship _____

Address: _____
Street number/Name Suite City State Zip code

Home Phone # _____ Work # _____

Name of emergency contact: _____ Relationship _____

Address: _____
Street number/Name Suite City State Zip code

Home Phone # _____ Work # _____

Residential Information

Current address: _____
Street Number/Name Apt.# City State Zip code

From _____ To _____ Reason for leaving _____

Property Manager/Owner: _____ Phone # _____

Previous address: _____
Street Number/Name Apt.# City State Zip code

From _____ To _____ Reason for leaving _____

Property Manager/Owner: _____ Phone # _____

Employment Information

Current Employer: _____ Phone # _____

Address: _____
Street number/Name Suite City State Zip code

From _____ To _____ Position: _____ Monthly Gross Salary _____

Supervisor Name: _____

Previous Employer: _____ Phone # _____

Address: _____
Street number/Name Suite City State Zip code

From _____ To _____ Position: _____ Monthly Gross Salary _____

Supervisor Name: _____

Previous Employer: _____ Phone # _____

Address: _____
Street number/Name Suite City State Zip code

From _____ To _____ Position: _____ Monthly Gross Salary _____

Supervisor Name: _____

Other Income: If self-employed, retired, receive child support, Social Security, etc. Verification must be provided.

Source _____ Monthly amount _____

Please Check all that apply:

1. How many people will be living in the apartment? _____
2. Do you have any pets? ___ Yes ___ No If yes, what breed and how many? _____
3. Have you ever been delinquent in payment of rent or any other financial obligations? ___ Yes ___ No
If yes, please explain: _____
4. Have you ever been a defendant of an unlawful detainer (eviction), lawsuit or defaulted (failed to perform) any obligations of a rental agreement or lease? ___ Yes ___ No
If yes, please explain: _____
5. Have you ever been convicted of, plead guilty/no contest, or had a suspended imposition of sentence for any offense (other than a minor traffic violation)? ___ Yes ___ No
If yes, please explain: _____
(A conviction record will not necessarily exclude you from consideration.)
6. Have you ever been a Police Officer, Fire Fighter or served in the U.S. Armed Forces? ___ Yes ___ No
If yes, list branch of service and years served: _____
7. How did you hear about us? _____

The information I have provided on this application is true and correct to the best of my knowledge. I am aware that the application fee is non-refundable. As part of the residential rental application process, it is the policy of Thomasville Properties to obtain information on each applicant. I hereby authorize the release of all rental, employment, and credit history information, in addition to the order of both a consumer and criminal background report on me through Credit Link Corporation to enable an evaluation of my application to rent residential property. I am aware that an incomplete application may cause a delay in prescreening and may result in denial of tenancy. I understand I acquire no rights in a specific unit until I submit a holding deposit in the amount of \$700.00 and sign a lease agreement. Upon approval of tenancy and the signing of a rental agreement, this deposit will be credited towards my rental deposit.

Applicant Signature _____

Date _____

Thomasville Apartments

2340 East Pass Road

Gulfport, MS 39507

Office: 228-897-7684

Fax: 228-897-7684

Email: manager@thomasvilleapt.com

Date: _____

Attention to whom it may concern;

This is a request for rental history on the following current/previous tenant:

Name: _____

Address: _____

Resided from: _____ To: _____

Please answer the following questions:

1. Did the resident(s) pay rent on time? _____
If no, how many times late? _____
2. Did the resident(s) give proper notice to vacate? _____
3. Did the resident(s) have any lease violations? _____
4. Did the resident(s) fulfill lease term? _____
5. Did the resident(s) keep the unit clean and rent ready? _____
6. Did the resident(s) keep the unit free of hazards? _____
7. Did the resident(s) leave owing any money? _____
8. How many occupied the unit? _____
9. Did the resident(s) have pets? _____ If yes, how many and what breed? _____
10. What was the amount of the rent the resident(s) paid? _____
11. Would you rent to this resident(s) again? _____

Comments: _____

By signing this form, I authorize the release of my rental history.

Signature _____ Date _____

Signature of authorized representative completing this form.

Signature _____ Date _____