

Date Applied: ____ - ____ - ____

RENTAL APPLICATION

Neatly complete all information below. All applicants over the age of 18 must complete and sign their own application.

Applicant # 1

Full Name: _____ **DOB:** _____ **Phone:** _____
Social Security #: _____ **Drivers License #** _____ **State:** _____ **Exp:** _____
Auto Information: Year _____ Make _____ Model _____ State/License Plate # _____
Place of employment: _____ **How long at employer:** _____ **Weekly gross income:** _____
Work Address: _____ **Supervisor's Name:** _____
Additional Income: _____ **Credit Score** _____ **Have you ever been convicted of a felony or misdemeanor? YES / NO**

Applicant # 2

Full Name: _____ **DOB:** _____ **Phone:** _____
Social Security #: _____ **Drivers License #** _____ **State:** _____ **Exp:** _____
Auto Information: Year _____ Make _____ Model _____ State/License Plate # _____
Place of employment: _____ **How long at employer:** _____ **Weekly gross income:** _____
Work Address: _____ **Supervisor's Name:** _____
Additional Income: _____ **Credit Score** _____ **Have you ever been convicted of a felony or misdemeanor? YES / NO**

Current Address: _____ **City:** _____ **State:** _____ **Zip code:** _____

Current Landlords Name: _____ **Landlords Phone #** _____
how long there _____ **Current Lease payment: \$** _____ **Did you leave on good terms?** _____

Reason for moving from current address: _____

Previous Address: _____ **City:** _____ **State:** _____ **Zip code:** _____

Current Landlords Name: _____ **Landlords Phone #** _____
how long there _____ **Current Lease payment: \$** _____ **Did you leave on good terms?** _____

Reason for moving from current address: _____

Number & type of pets: _____ **Have you ever been party to an eviction? Yes / No**

Members in Family that will be living in residence

Name: _____	Age: _____	Name: _____	Age: _____	Name: _____	Age: _____
Name: _____	Age: _____	Name: _____	Age: _____	Name: _____	Age: _____

Personal References

Name _____	Years Known: _____	Relationship _____	Phone # _____
Name _____	Years Known: _____	Relationship _____	Phone # _____
Name _____	Years Known: _____	Relationship _____	Phone # _____

Emergency Contact Person: _____ **Address** _____ **City** _____ **State** _____ **Zip code** _____
Emergency Contact Phone # _____ **Relationship** _____

Current Bank: _____ **Banks Phone #** _____ **Contact Person:** _____

I Certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for tenant screening as may be necessary in arriving at a tenant decision. I understand that the landlord may terminate any rental agreement entered into for any misrepresentations made above.

Print Name: _____ **Signature:** _____ **Date:** _____

Return Application to: 1401 Fitzpatrick Avenue, Opelika, AL 36801. Ph: 334-749-3850 Fax: 334-749-9850 www.SMBRentals.com