

JAMES LITTLE REAL ESTATE, INC.
RENTAL APPLICATION

Phone: 910-892-6868

May be returned by mail: PO Box 963, Dunn, NC 28335

Fax: 910-892-2518

Email: info@jameslittlerealestate.com

Fee collected: _____
Date: _____

Date of Application _____

ONLY FULLY COMPLETED/SIGNED, LEGIBLE APPLICATIONS WILL BE CONSIDERED.
Please submit with non-refundable fee of \$25.00 for full consideration. Any person(s) over the age of 18 that will be residing in the same rental must fully complete a separate application.

APPLICANT INFORMATION:

Name: _____ Phone #: _____
Social Security #: _____ Date of Birth: _____
Drivers License #: _____ State: _____ Expiration: _____
Email: _____

Spouse: _____ Phone #: _____
Social Security #: _____ Date of Birth: _____
Drivers License #: _____ State: _____ Expiration: _____
Email: _____

OTHER DEPENDENTS TO OCCUPY UNIT:

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

Note: Occupants over the age of 18 must complete a separate application.

RESIDENCE HISTORY (For the past 3 years):

PRESENT ADDRESS (include zip):

Home Phone: _____ Mobile Phone: _____
Own: () Rent: () Monthly Rent or Mortgage Amount _____
Date Rental Started: _____
Reason For Leaving: _____

Present Landlord's Name: _____ LL Phone #: _____
Present Landlord's Address: _____

PREVIOUS ADDRESS (include zip):

Own: () Rent: () Monthly Rent or Mortgage Amount _____
Date Rental Started: _____
Reason For Leaving: _____

Previous Landlord's Name: _____ LL Phone #: _____
Previous Landlord's Address: _____

PREVIOUS ADDRESS: _____
Own: () Rent: () Monthly Rent or Mortgage Amount _____
Date Rental Started: _____
Reason For Leaving: _____

Previous Landlord's Name: _____ LL Phone #: _____
Previous Landlord's Address: _____

APPLICANT'S EMPLOYMENT (for past 3 years):

Status: () Full-time () Part-time () Student () Self-employed () Retired () Others

Number of Hours worked per week: _____

**Must provide copies of at least one of following: last 2 months of pay stubs; most recent tax return

Current Employer: _____

Address: _____

Phone # _____ Position: _____

Supervisor: _____

Date started: _____ Rate of pay: \$ _____

Likelihood of continued employment _____

Other Income: \$ _____ Source: _____

Total monthly net income (actual take home): \$ _____

Previous Employer: _____

Address: _____

Phone # _____ Position: _____

Supervisor: _____

Date started: _____ End Date: _____ Rate of pay: \$ _____

SPOUSE'S EMPLOYMENT (for past 3 years):

Status: () Full-time () Part-time () Student () Self-employed () Retired () Others

Number of Hours worked per week: _____

**Must provide copies of at least one of following: last 2 months of pay stubs; most recent tax return

Current Employer: _____

Address: _____

Phone # _____ Position: _____

Supervisor: _____

Date started: _____ Rate of pay: \$ _____

Likelihood of continued employment _____

Other Income: \$ _____ Source: _____

Total monthly net income (actual take home): \$ _____

Previous Employer: _____
 Address: _____
 Phone # _____ Position: _____
 Supervisor: _____
 Date started: _____ End Date: _____ Rate of pay: \$ _____

AUTOMOBILES: Total number of Vehicles: _____ (Identify each below)

Make of auto _____ Year _____ License # _____ State _____
 Make of auto _____ Year _____ License # _____ State _____
 Make of auto _____ Year _____ License # _____ State _____

FINANCIAL OBLIGATIONS:

Payment to _____ Monthly Amount \$ _____ Current balance \$ _____
 Payment to _____ Monthly Amount \$ _____ Current balance \$ _____
 Payment to _____ Monthly Amount \$ _____ Current balance \$ _____
 Payment to _____ Monthly Amount \$ _____ Current balance \$ _____
 Payment to _____ Monthly Amount \$ _____ Current balance \$ _____
 Payment to _____ Monthly Amount \$ _____ Current balance \$ _____

(Continue On Attached Sheet If Required)

BANK ACCOUNTS:

Bank/Location: _____ Account Type: _____ Balance \$ _____
 Bank/Location: _____ Account Type: _____ Balance \$ _____

OTHER: (if yes, attach explanation)

Have you ever filed bankruptcy? ()No ()Yes
 Have you ever been evicted from tenancy? ()No ()Yes
 Have you ever been arrested: ()No ()Yes
 Have you ever been convicted of a crime? ()No ()Yes
 Are there outstanding collections/judgments/charge off accts? ()No ()Yes
 Are you named as a defendant in any lawsuits? ()No ()Yes
 Are you required to pay alimony/child support? ()No ()Yes
 Will you have a waterbed on the property? ()No ()Yes
 Are there involuntary repossessions? ()No ()Yes

How is your credit? _____ What is your credit score? _____

OTHER PERSONAL INFORMATION:

Does anyone in household smoke? ()Yes ()No

Pet(s):

Name/Color	Type/Breed	Weight	Sex	Age	Indoor/Outdoor	Neutered/Spayed?
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_____	_____	_____	_____	_____	_____	_____
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Some of our rental units do not allow pets. Please see the property manager to verify if the rental unit you are applying for allows pets.

Person who could help you out financially: _____

Relationship: _____ Phone #: _____

Address: _____

In case of emergency notify: _____

Relationship: _____ Phone #: _____

Address (include zip):

The undersigned individual(s) make application to lease the dwelling located at:

_____ ,
for \$ _____ per month beginning _____
and ending _____ . All parties acknowledge

that application is being made for the referenced dwelling in its present condition unless otherwise noted, and that occupancy is subject to possession being delivered by the present occupant, if applicable. The above information is true and correct. **YOU MUST PROVIDE A COPY OF:** () Social Security Card () Drivers License () Copy of two most recent pay stubs for applicant and co-applicant.

Signature of Applicant

Date

Print Name

Signature of Co-Applicant

Date

Print Name

ADDENDUM TO RENTAL APPLICATION

For:

PRINT Applicant's and Co-Applicant's Name

I hereby authorize the Landlord or Landlord's agent to verify the information on my rental application. Verification may include, but not limited to, the rental application, my credit, my tenant history, my employment verification, my check writing history, any court records and/or my criminal record, and I hereby authorize and instruct any entity or person contacted by Landlord or Landlord's agent to promptly release such information to them by mail or fax.

Applicant's Signature: _____ **Date:** _____

A photocopy or fax may be used in lieu of the original

Co-Applicant's Signature: _____ **Date:** _____

A photocopy or fax may be used in lieu of the original