

Superior Real Estate Services Rental Application

Office: (912)545-7641 | Fax: (912)545-0067 | 271 S. McDonald Street Ludowici, Georgia 31316

All applicants **MUST** be 18 years or older. A separate application must be filled out by each adult applicant, except for married couples. Please note there is a **\$35 (non-refundable) application fee** due for each application and before the credit check.

Property Interested In			
Address:		Desired Move-In Date:	
Applicant Information			
Name:			
Date of birth:	SSN:	Phone:	
Email:			
Driver's License Number:		State:	
CURRENT ADDRESS:			
City:	State:	ZIP Code:	
Own Rent (Circle One)	Monthly payment or rent:	How long?	
Residential History (Previous)			
Address:			
City:	State:	ZIP Code:	
Owned Rented (Circle One)	Monthly payment or rent:	How long?	
Landlord Name:		Landlord Number:	
Reason for Leaving:			
Address:			
City:	State:	ZIP Code:	
Owned Rented (Circle One)	Monthly payment or rent:	How long?	
Landlord Name:		Landlord Number:	
Reason for Leaving:			
Employment Information			
Current employer:		Phone:	
Employer address:		How long?	
City:	State:	ZIP Code:	
Position:	Hourly Salary (Please circle)	Annual Monthly Income:	
Emergency Contact (Person NOT living with you)			
Name:			
Address:			
City:	State:	Zip Code:	
Relationship:		Phone:	
Additional Income			
Income:	Source:		
Income:	Source:		
Income:	Source:		
Dependents			
First Name:	Last Name:	Relation:	Date of Birth:
First Name:	Last Name:	Relation:	Date of Birth:
First Name:	Last Name:	Relation:	Date of Birth:
First Name:	Last Name:	Relation:	Date of Birth:
First Name:	Last Name:	Relation:	Date of Birth:

The above signed represents that all facts and statements presented herein are true and for the purpose of obtaining a credit report. The verification will be obtained from a recognized credit reporting service. The above signed also understands the decision to grant or deny this application is at the sole discretion of the agency/landlord.

Co-Applicant Information		
Name:		
Date of birth:	SSN:	Phone:
Email:		
Driver's License Number:	State:	
CURRENT ADDRESS:		
City:	State:	ZIP Code:
Own Rent (Circle One)	Monthly payment or rent:	How long?
Residential History (Previous)		
Address:		
City:	State:	ZIP Code:
Owned Rented (Circle One)	Monthly payment or rent:	How long?
Landlord Name:	Landlord Number:	
Reason for Leaving:		
Address:		
City:	State:	ZIP Code:
Owned Rented (Circle One)	Monthly payment or rent:	How long?
Landlord Name:	Landlord Number:	
Reason for Leaving:		
Co-Applicant Employment Information		
Current employer:	Phone:	
Employer address:	How long?	
City:	State:	ZIP Code:
Position:	Hourly Salary (Please circle)	Annual Monthly Income:
Co-Applicant Additional Income		
Income:	Source:	
Income:	Source:	
Income:	Source:	
Please answer the following: (Circle Y or N)		
Ever filed Bankruptcy?	Y or N	If yes, year and reason?
Ever been convicted of a crime?	Y or N	If yes, year and reason?
Have you ever been evicted?	Y or N	If yes, year and reason?
Are you a smoker?	Y or N	
Do you have pets?	Y or N	Describe:
I represent that the information contained in this application is true and complete to the best of my knowledge.		
Signature of Applicant:	Date:	
Signature of Co-Applicant:	Date:	

The above signed represents that all facts and statements presented herein are true and for the purpose of obtaining a credit report. The verification will be obtained from a recognized credit reporting service. The above signed also understands the decision to grant or deny this application is at the sole discretion of the agency/landlord.