

**RENTAL APPLICATION**  
*PLEASE ANSWER ALL QUESTIONS*

**Date of Application** \_\_\_\_\_ Lease term desired \_\_\_\_\_ Unit # assigned \_\_\_\_\_

**Applicant's Name** \_\_\_\_\_ Social Security #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License #/State: \_\_\_\_\_

Telephone #: (home/mobile) \_\_\_\_\_ (work) \_\_\_\_\_

Check one:  Married  Divorced  Separated  Single

Present Address \_\_\_\_\_

Check one:  Own home  Rent  Other Monthly Rent/Mortgage Amount \$ \_\_\_\_\_

Name of Apartment Community or Mortgage Company: \_\_\_\_\_

Telephone # of Apartment Community: \_\_\_\_\_ Fax #: \_\_\_\_\_

Employed by: \_\_\_\_\_ Position/Title: \_\_\_\_\_

How long on job: \_\_\_\_\_ Income: \$ \_\_\_\_\_ Hourly/ Monthly/ Yearly

Supervisors Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

**Spouse's Name** \_\_\_\_\_ Social Security #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License #: \_\_\_\_\_

Employed by: \_\_\_\_\_ Position/Title: \_\_\_\_\_

How long on job: \_\_\_\_\_ Income: \$ \_\_\_\_\_ Hourly/ Monthly/ Yearly

Supervisors Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

**Others who will occupy apartment:**

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

**Description of any pets to occupy apartment (must have written consent from owner/agent):**

Pet type \_\_\_\_\_ Full grown weight \_\_\_\_\_ Answers to " \_\_\_\_\_ "

Pet type \_\_\_\_\_ Full grown weight \_\_\_\_\_ Answers to " \_\_\_\_\_ "

*Security Deposit in the sum of **\$99.00** is made with the clear understanding that this application, including each prospective occupant, is subject to approval and acceptance. The applicant(s) agree to execute a lease and pay the prorated and/or first month's rent before possession is given. **The applicant(s) has a maximum of three days within which to cancel this application in writing and have his/her security deposit returned to him/her. If this application is canceled after 3 days, or should the applicant not execute a lease or occupy premises, the security deposit will be forfeited.** If application is not approved by the owner or agent, the security deposit will be returned. Application fee of \$45.00\_ is non-refundable.*

*By signing, the applicant(s) gives permission for the Landlord or agent to investigate the information supplied on this application and a full disclosure of pertinent facts may be made to the Landlord. Applicant understands that approval process will include a review of credit history and possible criminal background check. Furthermore, the undersigned declares that the information provided on this application is true and correct and false statements or information may result in the rejection of this and future applications for housing managed by Pickering and Company.*

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse's Signature

\_\_\_\_\_  
Date

# RENTAL VERIFICATION

*This request for verification of rental history on the below referenced individual is part of the application approval process for residency in an apartment community managed by Pickering and Company.*

I, \_\_\_\_\_ ( \_\_\_\_\_ )  
Signature of Applicant Printed Name of Applicant

give permission for the information requested below to be released to  
Mallard Creek Apartments for the purpose of application approval.

Community or Landlord Name: \_\_\_\_\_

Address : \_\_\_\_\_

Dates of Residency: From: \_\_\_\_\_ To: \_\_\_\_\_

Lease fulfilled? Yes \_\_\_\_\_ No \_\_\_\_\_

Monthly rental amount: \$ \_\_\_\_\_ Number of times late \_\_\_\_\_

Number of NSF's: \_\_\_\_\_ Number of Court filings: \_\_\_\_\_ Evicted? Yes No

Do they currently have a pet? Yes No Complaints: \_\_\_\_\_

Would you re-rent to this person? Yes No

Name and title of person verifying information: \_\_\_\_\_  
(Please print title)

\_\_\_\_\_  
(Signature of person verifying information)

\_\_\_\_\_  
(Printed name of person verifying information)

Please fax back to 704-873-0444. Thank you!

# EMPLOYMENT/INCOME VERIFICATION

*This request for verification of employment or income information on the below referenced individual is part of the application approval process for residency in an apartment community managed by Pickering and Company.*

I, \_\_\_\_\_ ( \_\_\_\_\_ )  
Signature of Applicant Printed Name of Applicant

give permission for the information requested below to be released to Mallard Creek Apartments for the purpose of application approval.

Company Name: \_\_\_\_\_

Applicant's position with company: \_\_\_\_\_

Dates of employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Rate of pay: \$ \_\_\_\_\_ Yearly, monthly, weekly, hourly  
(Circle one)

Average number of hours in work week: \_\_\_\_\_

Probability of continued employment: \_\_\_\_\_

Name and title of person verifying information: \_\_\_\_\_  
(Please print title)

\_\_\_\_\_  
(Signature of person verifying information)

\_\_\_\_\_  
(Printed name of person verifying information)

Please fax back to 704-873-0444. Thank  
you!