

Return to:

Lance C. Arbuckle
2901 NE Bon Air Ave
Winston Salem, NC 27105
(336) 793-1000

Residential Lease Application

Property Applied For: 1779 Crampton Street, Winston Salem, NC 27107

Rental Rate: \$ 650

Deposit: \$ 650

Do you have the money required for the deposit and first month rent ?

☐ YES

☐ NO

When would you like to move in ?

Applicant 1:

Full Name

Last

First

Middle

Current Address:

☐ Owned

☐ Rented

Street & No., RFD, Apt. No.

City

, State

Zip Code

Monthly Payment: \$

Dates at this Address - From / To:

/

Reason for Leaving:

Landlord's Name:

Landlord's Phone

Previous Address:

☐ Owned

☐ Rented

Street & No., RFD, Apt. No.

City

, State

Zip Code

Monthly Payment: \$

Dates at this Address - From / To:

to

Reason for Leaving

Landlord's Name:

Landlord's Phone

Telephone Numbers:

Home

Cell

Work

Primary Email Address

Alternate Email Address

Date of Birth:

Social Security Number:

Drivers Lic: Num / State

Do You Smoke ?

☐ YES

☐ NO

Applicant 2:

Full Name

--	--	--

Last

First

Middle

Relationship to Applicant

--

Current Address:

--	--	--	--

☐ Owned ☐ Rented

Same As Above or Street & No., RFD, Apt. No.

City

, State

Zip Code

Monthly Payment: \$

--

Dates at this Address - From / To:

--

/

--

Reason for Leaving:

--

Landlord's Name:

--

Landlord's Phone

--

Previous Address:

--	--	--	--

☐ Owned ☐ Rented

Same As Above or Street & No., RFD, Apt. No.

City

, State

Zip Code

Monthly Payment: \$

--

Dates at this Address - From / To:

--

to

--

Reason for Leaving

--

Landlord's Name:

--

Landlord's Phone

--

Telephone Numbers:

--

--

--

Home

Cell

Work

Primary Email Address

--

Alternate Email Address

--

Date of Birth:

--

Social Security Number:

--

Drivers Lic: Num / State

	/	
--	---	--

Do You Smoke ?

☐ YES☐ NO**Additional Occupants:** List everyone, including children, who will be living with you.

Full Name

Relationship

Age

Smoker ?

1

--

--

--

☐ YES☐ NO

2

--

--

--

☐ YES☐ NO

3

--

--

--

☐ YES☐ NO

4

--

--

--

☐ YES☐ NO**Pets:** Describe the number and type of pets you want to have in the rental property. No reptiles or large birds are allowed.

Breed

Weight

Mature Weight

Name

--

--

--

--

--

--

--

--

--

--

--

--

Applicant 1 Employment History:

Applicants Current Employer:		Phone	
Address			
Name & Title of Supervisor		Phone	
Dates Employed at this Job: Mon/Yr / To / Position or Title:			
Previous Employer:		Phone	

Applicant 2 Employment History:

Co- Applicants Current Employer:		Phone	
Address			
Name & Title of Supervisor		Phone	
Dates Employed at this Job: Mon/Yr / To / Position or Title:			
Previous Employer:		Phone	

Income:

Applicants gross monthly employment income (before deductions)	\$	
Co - Applicants gross monthly employment income (before deductions)	\$	
Average monthly amount of other income (Specify Source)		\$
		\$
		\$
TOTAL MONTHLY INCOME	\$	

Credit and Financial Information:

Credit Accounts / Loans	Type of Account (Auto/Visa)	Name of Creditor	Amount Owed	Monthly Payment
Major Credit Card			\$	\$
Major Credit Card			\$	\$
Loan (Auto 1 / Student)			\$	\$
Loan (Auto 2 / Student)			\$	\$
Loan (Auto 3 / Student)			\$	\$
Auto / Life Insurance			\$	\$
Electric (Average)			\$	\$
Water, Sewer, Garbage			\$	\$
TV, Cell Phone, Internet			\$	\$
Alimony, Child Support			\$	\$
Other			\$	\$
Other			\$	\$
TOTAL MONTHLY OBLIGATIONS				\$

Miscellaneous:

Have you ever filed for bankruptcy?

☐ YES ☐ NO

Have you ever been sued?

☐ YES ☐ NO

Have you ever been evicted?

☐ YES ☐ NO

Have you ever been convicted of a crime?

☐ YES ☐ NO

Explain any "yes" listed above:

Do you smoke?

☐ YES ☐ NO

Does any other occupant smoke?

☐ YES ☐ NO**References and Emergency Contact:**

Emergency Contact not residing with you

--

Address

--

Relationship to Applicant

--

Phone

--

Personal Reference

--

Address

--

Relationship to Applicant

--

Phone

--

Personal Reference

--

Address

--

Relationship to Applicant

--

Phone

--

By signing or typing my name below, I certify that all the information given above is true and correct and understand that my lease or rental agreement may be terminated if I have made any material false or incomplete statements in this application. I authorize verification of the information provided in this application from my credit sources, credit bureaus, current and previous landlords and employers and personal references. This permission will survive the expiration of my tenancy.

Applicant Name (Print)

--

Co-Applicant Name (Print)

--

Applicant Signature:

Co-Applicant Signature:

Applications will be processed as received. Receiving an application does not reserve the rental property for the applicant. The first completed and approved application party (including all applicants to reside in the rental property) will be notified of the approval and three business days will be allowed for receipt of the reservation deposit. Within 14 days or before moving in, a lease must then be signed and the first months rent, security deposit, and any pet deposit paid. Failure to conform will result in lost of reservation deposit to cover 1/2 month rent and re-advertising the property.

Tenancy is not denied based on any of the following criteria: Race, color, religion, sex, national origin, physical or mental handicaps, or familial status

Submit Application