



Rawlings Realty LLC
1012 Memorial Drive Suite 2
Griffin, GA 30224
(678)692-8639 Office
(678)692-8643 Fax

Date of Application: _____

Application for Rental Property

Full Name: _____

Current Address _____

(Street City State Zip)

Home Phone: _____ Cell Phone: _____

Email: _____ Gender: Male Female

Marital Status: Single Married Divorced Separated Widowed

Date of Birth: _____ Social Security Number _____

Employment Information

Current Employer _____ Occupation _____

Address: _____

Street City State Zip

Supervisor's Name: _____ Phone: _____

Start Date: _____ End Date: _____ Annual Income: _____

Former Employer: _____

Address: _____

Street City State Zip

Former Supervisor's Name: _____ Phone: _____

Start Date: _____ End Date: _____ Annual Income: _____

Rental History

Current Address _____

City State Zip

Move in Date _____ Move out Date _____

Landlord's Name Landlord's Phone Number

Previous Address (If at current address less than 5 years): _____

Street

City State Zip

Move in Date _____ Move out Date _____

Landlord's Name Landlord's Phone Number

Have you been evicted or has your landlord(s) ever taken Legal Action for Non-Payment?

Yes No Dates: _____

Have you ever been arrested? Yes No If yes, When? _____

Please explain: _____

Have your utilities ever been cut off for a delinquent bill? Yes No If yes, When? _____

By Whom? _____

Other Information

In case of an Emergency, whom should we contact? _____

Home: _____ Cell Phone: _____

Relationship to Tenant: _____

If there will be children residing at the home, please list their names, ages, and relationship to you:

Name: _____ Age: _____ Relationship: _____

Name: _____ Age: _____ Relationship: _____

Name: _____ Age: _____ Relationship: _____

Name: _____ Age: _____ Relationship: _____

Name: _____ Age: _____ Relationship: _____

A \$25 Application Fee will charged per adult.

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The Undersigned make(s) the foregoing representation(s) as being true and herby authorizes permission for verification and a Consumer Credit Report and/or Background Check to be performed, if needed. The undersigned understands that upon approval a **12 month Lease is required on all properties and First Month Rent and Security Deposit** is required up front before moving into the property. The Undersigned understands that No Pets are allowed unless specific approval is granted. If approved, a Pet Deposit may be required.

Signature _____ Date _____