



Perimeter North Properties Group, LLC

1500 Abbey Court
Alpharetta, GA 30004
management@qualityrentalhomes.com
770-846-8086 (Cell) 770-200-1970 (eFax)



GEORGIA RESIDENTIAL RENTAL APPLICATION

Today's Date: _____ Date to Occupy: _____ 2011

Full Property Address: _____

APPLICANT INFORMATION

All Applicant Names	Social Security Number	Birth Date

OCCUPANT INFORMATION

All Occupant Names	Social Security Number	Birth Date

Pet Information - Number of Cats: _____ Number of Dogs: _____ Breeds: _____

RESIDENCE HISTORY (To be completed by each applicant)

Present Address: _____
City: _____ State: _____ Zip: _____ Telephone: _____
Landlord/mortgage holder's name: _____ Telephone: _____
Length of time at present address: _____ Monthly payment:\$ _____
Reason for moving: _____

Previous Address: _____
City: _____ State: _____ Zip: _____ Telephone: _____
Landlord/mortgage holder's name: _____ Telephone: _____
Length of time at present address: _____ Monthly payment:\$ _____
Reason for moving: _____

Present Address: _____
City: _____ State: _____ Zip: _____ Telephone: _____
Landlord/mortgage holder's name: _____ Telephone: _____
Length of time at present address: _____ Monthly payment:\$ _____
Reason for moving: _____

Previous Address: _____
City: _____ State: _____ Zip: _____ Telephone: _____
Landlord/mortgage holder's name: _____ Telephone: _____
Length of time at present address: _____ Monthly payment:\$ _____
Reason for moving: _____

EMPLOYMENT HISTORY (To be completed by each applicant)

Applicant One: Employer's Name: _____
 Employer's Address: _____
 City: _____ State: _____ Zip: _____ Telephone _____
 How long have you been employed by this company? _____ Position Held _____
 Supervisor's Name: _____ Telephone _____
 Current Annual Salary: \$ _____ Additional Income: \$ _____ Source _____

Previous Employer's Name: _____
 Previous Employer's Address: _____
 City: _____ State: _____ Zip: _____ Telephone _____
 How long were you employed by this company? _____ Position Held _____
 Supervisor's Name: _____ Telephone _____
 Reason for leaving _____

Applicant Two: Employer's Name: _____
 Employer's Address: _____
 City: _____ State: _____ Zip: _____ Telephone _____
 How long have you been employed by this company? _____ Position Held _____
 Supervisor's Name: _____ Telephone _____
 Current Annual Salary: \$ _____ Additional Income: \$ _____ Source _____

Previous Employer's Name: _____
 Previous Employer's Address: _____
 City: _____ State: _____ Zip: _____ Telephone _____
 How long were you employed by this company? _____ Position Held _____
 Supervisor's Name: _____ Telephone _____
 Reason for leaving _____

VEHICLE INFORMATION

Applicant1 Driver License# _____ State: _____ Expires: _____
 Applicant2 Driver License# _____ State: _____ Expires: _____
 Number of vehicles including company cars, boats, RVs, etc.: _____

Make	Model	Year	Color	Own/Lease/Finance	Tag State	Tag No.

EMERGENCY NOTIFICATION

In case of emergency – Name and address of two nearest relatives not living with you:
Name: _____ Telephone: _____
Address: _____
Relationship: _____

Name: _____ Telephone: _____
Address: _____
Relationship: _____

PERSONAL REFERENCES

Name: _____ Telephone: _____
Name: _____ Telephone: _____
Name: _____ Telephone: _____

APPLICANT AGREES TO PAY A APPLICATION FEE

Telephone number where you can be reached once this application has been processed: _____
Fax number or eMail address to send confirmation this application has been processed: _____
How did you find out about this property? _____

TERMS AND CONDITIONS

This application is accompanied by a money order or certified check for earnest money in an amount equal to the first month's rent. If this application is accepted, I/We understand the money order or certified check will be deposited and is non-refundable. If this application is not accepted, I/We understand the money order or certified check will be returned uncashed.

I/We authorize the agent for the owner of this property to verify information provided in this application and obtain a credit report. I/We acknowledge this application is the property of Owner.

Applicant's signature _____ Date: _____

Co-Applicant's signature _____ Date: _____

Earnest Money: \$ _____

Special Stipulations: _____

Please make the money order or certified check out to:
Perimeter North Properties Group, LLC

This is an Equal Housing Opportunity

