

**Perimeter North Properties Group, LLC**

902 Abbey Court

Alpharetta, GA 30004

management@qualityrentalhomes.com

770-846-8086 (Main) 770-200-1970 (eFax)

**GEORGIA RESIDENTIAL RENTAL APPLICATION**

Today's Date: _____ Date to Occupy: _____ 2021

Full Property Address: 1049 Bridgemill Ave, Canton GA 30114

APPLICANT INFORMATION

All Applicant Names

Social Security Number

Birth Date

OCCUPANT INFORMATION

All Occupant Names

Social Security Number

Birth Date

Pet Information – No Pets allowed

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

