KINGLANDER PROPERTY MANAGEMENT

147 Old Park Ave. (859) 338-1774~Mobile / (859) 685-8593~Fax Leeoraking@yahoo.com

APPLICATION

Thank you for applying with Kinglander Property Management Company. Please provide us with all the information requested below. Incomplete information will only delay the processing. **Each co-resident must submit a separate application.**

Unit:		Date:				
		APPLICA	<u>NT</u>			
Full Name (Last)		(First)	(Middle)			
Phone #	Cell # _	Work	c#			
E-Mail Address:		Date of Birth	Social Sec	Social Security #		
Occupation		Monthly Income	Additional Inc	Additional Income		
Make & Model of C	ar (s) Color (s)					
Drivers License #		State	License Plate # (s)			
Current Address:						
Street		Apt. #City	StateZip	Rent or Own		
Dates	Monthly Amount	Landlord/Lender	Phone #	Cell #		
Previous Address:						
Street		Apt. #City	State Zip	Rent or Own		
Dates	Monthly Amount	Landlord/Lender	Phone #	Cell #		
Current Employer:	:					
Name/Co		Address Employment Dates				
Position	Salary	Supervisor	Phone #	Other Income		
Previous Employer	:					
Name/Co		Address	Employmen	Employment Dates		
Position	Salary	Supervisor	Phone #			
	i ich otiiede		JNIT ON A PERMANENT BA	cic.		
E-II No.						
Full Name		Soc. Sec. #	Relationship	Date of Birth		

Relatives/Emergency Contac	ts:			
Name:		Name:		
Address:		Address:		
City/State:		City/State: _		
Phone:		Phone:		
Have you ever been delinquent (Fail to perform) any obligation If Yes, Explain:	n of a rental agreement	or lease? Yes or No_		tion) lawsuit or defaulted
Have you ever been convicted If Yes, Explain:				<u> </u>
Pet Information:				
Do you have a pet or pets?	Type	Breed	Height	Weight
I hereby understand and agree, rent, and will not be applied to I hereby understand and agree, in this rental application and mupon approval, if I fail to sign rental application. The \$damages and I agree to this amperform as stated above after a three (3) days.	that the applicate any rent or deposits/fee in the event of the apply rental liability shall of the lease and/or pay age holding fee tount being retained by pproval. I understand to	tion fee cash or Money Order es due, or refunded, even if this roval of this application, to exercise reed rental, Escrow/Damage Deaccompanying this application landlord as a reasonable estimathat the above holding fee accompanying fee	for verifying this application is declined application is declined cute a lease in accordance 20, pursuant to exposit, or other required shall be retained by land the of actual damages to appanying this application	cation is not a deposit or for any reason. ce with the terms set forth terms of the lease. That, charges as shown in this dlord as liquidated landlord if I failed to on is non-refundable after
MANAGEMENT and/or agent mentioned accommodation upon	on which the holding fe	e shall be refunded.		
I have read the forgoing, certifinducing approval of this appli		erein is TRUE and CORRECT	that this application is s	ubmitted for purpose of
BY SIGNING THIS APPLICAND AUTHORIZE AGENT ORECORDS AND ALSO, LAW TO REJECTION OF YOUR A	OF THE MANAGEME V ENFORCEMENT RI	NT TO VERIFY THIS INFOR	MATION REFERENC EMENT ON THIS API	ES, AND CREDIT PLICATION CAN LEAD
SIGNATURE		PRINT NAME	DA	 ГЕ
SIGNATURE		PRINT NAME	DA	 ΓΕ
MANAGEMENT REPRESEN	TATIVE	DATE		

Upon application approval, you have 48 hours to submit your deposit and sign your lease in order to hold the property.

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Employment Verification Form

Applicant: Please ONLY sign and date the bottom of this form

Applicant's Name:					
Applicant's Social Security Nu	mber:				
Applicant's Position:					
Length of employment:					
Salary: \$					
How long at current position: _					
Is this position full-time or part	-time?	Full-time		Part-time	
If part- time, how many hours p	oer week?				
Is this position temporary?					
Other Remarks:					
			_		
Signature of Employer				Date	
Phone Number					
 					
Address					
City	State	Z	iip		
I hereby authorize and request eligibility for housing.	my employer to furnish t	he above info	rmation, v	which is necessary in	n determining
Signature of Applicant			_	Date	

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Rental Verification Form Applicant: Please ONLY sign and date the bottom of this form

Applicant's Name:
Address of unit rented:
Pates applicant rented from you:
from: To: Has applicant given proper notice to vacate?
Vill applicant be breaking their lease agreement?How many people resides/resided with applicant?
What is/was applicant's rent? Is/Was the resident receiving subsidized housing assistance?
f yes, what type?
c. If late, how often?
d. Have you ever begun eviction proceedings for non-payment?
e. Did applicant ever have NSF payment? 2. Caring for the unit: a. Did the applicant ever damage rental unit or common areas?
b. If so, did applicant pay for the damages?
c. Will/Did you keep any of the security deposit?
a. Does/Did applicant permit persons other than those on the lease to live in the unit?
b. Does/Did applicant interfere with the rights and quiet enjoyment of other residents?
c. Does/Did applicant create any physical or social hazards to the unit or to other residents?
d. Has applicant ever given you any false information?
e. Would you rent to this applicant again?
f. If not, why?
ignature of Landlord Date Phone Number
Address of Landlord hereby authorize and request my landlord to furnish the above information which is necessary in determining eligibility for the housing
ignature of Applicant Date