

JOINER MANAGEMENT

**155 International Dr.
Athens GA 30605
706-353-6868
Fax 706-353-2251**

Office use only:

PG: Y N _____

Photo ID: Y N

LTR: Y N _____

UNIT _____

Where did you hear about us? _____

Desired Move In Date _____

If Student PROGRAM of STUDY: _____

Application for Apartment Rental - Please Print and fill out completely

FULL NAME: _____

SEX (circle) M F DATE OF BIRTH: _____

SOCIAL SECURITY # _____ DRIVER'S LIC # _____

CURRENT ADDRESS: _____ CITY _____ ST _____ ZIP _____

CURRENT PHONE: _____ E-MAIL _____

CURRENT CELL PHONE #: _____ PERMANENT PHONE # _____

CURRENT LANDLORD INFORMATION:

LANDLORD PH. #: _____ RENT AMT _____ LENGTH OF OCCUPANCY _____

NAME of COMPLEX or LAND LORD: _____

EMPLOYMENT INFORMATION:

EMPLOYER: _____ POSITION _____

WORK PHONE: _____ SUPERVISOR: _____

NET INCOME: \$ _____ (**per month**) LENGTH OF EMPLOYMENT _____

REFERENCES: (previous Landlord, employer,) include phone #'s

IF YOU WILL BE PARKING A VEHICLE ON THE PREMISES, OR HAVE A PET:

MAKE: _____ MODEL: _____ COLOR: _____ YEAR: _____ PLATE # _____

PET TYPE: _____ BREED: _____ NAME: _____ AGE: _____ Spay/Neutered Y N

ALL INFORMATION MUST BE KEPT UP TO DATE (NO PETS AT TANYARD)

IN CASE OF EMERGENCY NOTIFY: (parent or relative not living with you)

NAME: _____ Relationship _____

Full Address: _____

City _____ ST _____ ZIP _____ Home ph #: _____

Employer: _____ Phone # Day: _____

Names of others to occupy unit: _____

Have you ever been convicted of a Felony? _____, if yes, please explain: _____

THE VALIDITY OF ALL LEASES IS CONTINGENT UPON THE APPROVAL OF THE APPLICATION BY THE LANDLORD. ANY FALSE INFORMATION WILL BE GROUNDS FOR DENIAL OF RENTAL. **I hereby make this application for the above rental and certify that the above information is true and correct. I authorize Joiner Management to contact any references that I have listed and to obtain a credit report and/or criminal history report as needed from any credit reporting agency.**

Signature of Applicant

Date