

iDeal Property Management Group, LLC

214 East Arlington Blvd, Greenville NC 27858

Phone (252)756-8488

Fax (252)756-8483

RENTAL APPLICATION

Date : _____

Address Requested: _____

Date of Expected Occupancy: _____

Preferences : _____

OFFICE USE ONLY

Approved _____ Denied _____

Amount of Deposit Required : _____

ALL APPLICANTS MUST PROVIDE A STATE ISSUED PHOTO ID, SOCIAL SECURITY CARD & PROOF OF INCOME WITH SUBMISSION OF THIS APPLICATION. PLEASE ALLOW 24 HOURS FOR APPLICATION TO BE PROCESSED.

APPLICANT INFORMATION

Applicants Full Name _____
First Middle Last

Social Security # _____ - _____ - _____ Driver's License # _____ State _____ Exp. _____

Current Phone Numbers _____ Date Of Birth _____

Children's Names & Ages Living with you _____

List any relatives / roommates who will reside with you _____

EMAIL Address : _____

RESIDENCY INFORMATION/HISTORY

Please Circle one : Do you? **Rent** **Own** - **Live with, Parent / Relative / Friend**

Current Address _____ City _____ State _____ Zip _____

Owner/ Management Company, if renting _____ Phone # _____

How long at this address _____ Reason for leaving _____

Previous Address _____ City _____ State _____ Zip _____

Owner/ Management Company _____ Phone # _____

How long at this address _____ Reason for leaving _____

EMPLOYMENT INFORMATION

Present Employer _____ Phone # _____

How long at job _____ Position _____ Supervisors Name _____

Employers Address _____ City _____ State _____

Net Monthly Income _____

Other income, Please list source and amount _____

STUDENTS ONLY (*Students and anyone under 21 years are required to have a signed Parental Guarantee Form)

Parents Name _____

Address _____ City, State, Zip _____

Home Phone # _____ Cell # _____ Work # _____

PETS (A signed pet lease, \$ 200 non-refundable pet deposit & small monthly fee is required if property desired allows pets)

Do you have any pets _____ If yes, How many _____

Type _____ Breed _____ Weight _____ Are Vaccinations Current _____

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AUTOMOBILE INFORMATION

Year _____ Make _____ Model _____ Color _____ State/License Plate # _____

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MANDATORY SCREENING QUESTIONS

1.) Have you ever been evicted or a defendant in an eviction action? _____

2.) Do you owe any other landlords/property mgmt. companies money? _____ If yes, How much? _____

3.) Have you ever been asked to move because of any kind of lease violation? _____ If yes, explain _____

4.) Do you smoke? _____

5.) Do you have Renter's Insurance? _____

6.) Have you ever been convicted of a felony? _____ If yes please explain _____

In Case of Emergency Please Notify

Name _____ Relationship _____ Phone # _____

Address _____

I understand that the completion of this application does not insure that iDeal Property Management Group, LLC , or its agents are under any obligation to approve the application or to guarantee occupancy of the proposed premises and that I am under no obligation to lease the premises.

**** Approved applications require that a security deposit be received within 72 hours to secure your property. ****

I verify that all information is true, accurate, and complete to the best of my knowledge. I hereby authorize iDeal Property Management Group LLC, its owners, and/or agents to confirm and verify all information provided on this application; to obtain a credit report, criminal background history, employment verification, and rental verifications.

A non-refundable application fee of \$40.00 is required to process this application. Money order only.

Print Name

Signature

Date