



Southern Portfolio Management
Success Is Our Standard

Application for Residency



Welcome Home

Please Return to Office

- Application Completed
- Driver Licenses or State ID (anyone over 18)
- Social Security Card (anyone over 18)
- Last 3 paycheck stubs or verification of income
- Non-Refundable Application Fee in Money Order or Cashier's Check
 - One Applicant \$52.00
 - Two Applicant \$90.00
 - Any Occupant Over 18 \$40.00 each

** If you supply your own Background, cost for application fee will be \$25⁰⁰ per person.*

Sign Application

******Community Property Office Use Only ****Do Not write below this line ******

Community _____ Lot # _____ IRTO Renewal of Lot Renewal of Home and Lot _____

Requested Move -In Date: _____

Proposed Total Home Price: _____ Cash Sale Months of Lease _____

Proposed Home Payment Amount: _____ Advanced Payment Agreed _____

Property Lot amount _____ Property Utility Amount _____



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PLEASE PRINT- All information must be completed. All blanks must be filled in. This application will not be considered complete till Drivers License, Social Security Cards, Paystubs or verification of income, with your Application Fee of \$52.00 For One Applicant or \$90.00 for Two. All occupants Over 18 must have a criminal background check at the Cost of \$40.00.

How Did You Hear about us?

- Resident Craigslist Website Drive-By Google Search
 Other _____

APPLICANT ONE PERSONAL INFORMATION

Full Name _____ Phone (____) _____ Work Phone (____) _____

Email Address _____

Social Security Number _____ Birthdate ____/____/____ Current Driver's License # _____ State _____

Present Address _____ City _____ State _____ Zip _____

How Long? _____ If renting, Apartment name/location _____ Phone (____) _____

Landlord/Manager name _____ Alternative Phone (____) _____

Why are you leaving? _____

Current Rent \$ _____

Previous Address _____ City _____ State _____ Zip _____

How long? _____ If renting, Apt. name/location _____ Phone (____) _____

Landlord/Mgr.'s name _____ Alternative Phone (____) _____

Why did you leave? _____

Rent Payment \$ _____

Present employer _____ Position _____ How long? _____

Address _____ Phone (____) _____

Gross Monthly Income before deductions \$ _____ Other Income \$ _____ Source _____

Former Employer _____ Position _____ How long? _____

Address _____ Phone (____) _____

PERSONAL HISTORY

Have you ever been evicted? YES NO

If yes, explain _____

Have you ever had a foreclosure / repossession? Yes No

If yes, explain _____

Have you ever filed for bankruptcy? Yes No Chapter 7 Chapter 13

If yes, explain _____

Have you ever been convicted of a crime, other than a traffic violation? Yes No

If yes, explain _____



APPLICANT TWO PERSONAL INFORMATION

Full Name _____ Phone (____) _____ Work Phone (____) _____

Social Security Number ____ - ____ - ____ Birthdate ____ / ____ / ____ Current Driver's License # _____ State _____

Present Address _____ City _____ State _____ Zip _____

How Long? _____ If renting, Apartment name/location _____ Phone (____) _____

Landlord/Manager name _____ Alternative Phone (____) _____

Why are you leaving? _____

Current Rent \$ _____

Previous Address _____ City _____ State _____ Zip _____

How long? _____ If renting, Apt. name/location _____ Phone (____) _____

Landlord/Mgr.'s name _____ Alternative Phone (____) _____

Why did you leave? _____

Rent Payment \$ _____

Present employer _____ Position _____ How long? _____

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Gross Monthly Income before deductions \$ _____ Other Income \$ _____ Source _____

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Have you ever had a foreclosure / repossession? Yes No

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Have you ever filed for bankruptcy? Yes No Chapter 7 Chapter 13

If yes, explain _____

Have you ever been convicted of a crime, other than a traffic violation? Yes No

If yes, explain _____

OTHER INFORMATION

(Other persons, who will live in the dwelling unit, include children)

Name _____ Birthday _____ Check Name _____ Birthday _____ Check

Name _____ Birthday _____ Check Name _____ Birthday _____ Check



PERSONAL REFERENCES

(List 4 persons, OTHER THAN YOUR RELATIVES, that we may contact to verify your character.)

Name _____ Relationship _____ Phone (____) _____
 Address _____ City _____ State _____ Zip _____

Name _____ Relationship _____ Phone (____) _____
 Address _____ City _____ State _____ Zip _____

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 Address _____ City _____ State _____ Zip _____

Name _____ Relationship _____ Phone (____) _____
 Address _____ City _____ State _____ Zip _____

EMERGENCY

(In an emergency you may contact- List 2 starting with nearest relative first.)

Name _____ Relationship _____ Phone (____) _____
 Address _____ City _____ State _____ Zip _____

Name _____ Relationship _____ Phone (____) _____
 Address _____ City _____ State _____ Zip _____

PETS

Name _____ Type _____ Weight _____ Name _____ Type _____ Weight _____

***NOTE: No pets are allowed at any time on the premises without prior Management consent, and NO PETS OVER 15 POUNDS ARE ALLOWED, NO EXCEPTIONS.**

LIST ALL MOTOR VEHICLES, INCLUDING RECREATIONAL TO BE KEPT AT THE PROPERTY

<u>MAKE</u>	<u>COLOR</u>	<u>MODEL</u>	<u>YEAR</u>	<u>LICENSE PLATE #</u>	<u>STATE</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

I declare that this application is complete, true and correct and I herewith give my permission for anyone contacted to release the credit or personal information of the undersigned applicant to Management or their authorized agents, at any time, for the purposes of entering into and continuing to offer or collect on any agreement and/or credit extended. I further authorize Management or their Authorized Agents to verify the application information including but not limited to obtaining criminal records, contacting creditors, present or former landlords, employers and personal references, whether listed or not, at the time of the application and at any time in the future, with regard to any agreement entered into with Management. Any false information will constitute ground for rejection of the application, or Management may at any time immediately terminate any agreement entered into in reliance upon misinformation given on this application.

Applicant's Authorization _____ Date

Co-Applicant's Authorization _____ Date

Occupant Authorization _____ Date

Occupant Authorization _____ Date



Georgia Crime Information Center

Consent Form

I, _____ hereby authorize AmRent to receive any Georgia criminal history recorded information pertaining to myself, which may be in the files of any state or local criminal justice agency in the state of Georgia.

Full Name (print)

Street Address

City

State and Zip

Date of Birth

Social Security Number

Signature

Date