

**ALBANY REALTY COMPANY
1212 DAWSON ROAD
ALBANY, GEORGIA 31707
PHONE 229 883-6100 FAX 229 883-6136**

When a deposit is paid to hold a rental unit, it is in good faith for up to 24 hours.
After 24 hours, the company will retain the deposit.

There is a \$30.00 application fee per person.
Application fees are **NON- REFUNDABLE**

**ANYONE WHO WILLINGLY PROVIDES FALSE INFORMATION ON THE RENTAL
APPLICATION WILL BE AUTOMATICALLY REJECTED.**

Qualification Procedures

1. Good and Verifiable rental history
2. Never been evicted or owe another landlord money (This is an automatic rejection)
3. Must have given proper notice to current landlord
4. Must have verifiable employment (check stubs, tax forms, etc)
5. Valid Driver's License and Social Security Card
6. Must be 21 years of age
7. Satisfactory credit check
8. A criminal history background check will be performed
9. Your monthly net income must be AT least 3 times the amount of rent. (if the rent is \$500.00 you must make at least \$1,500.00 net income per month)
10. If property is pet friendly, no pet (dog or cat) can weight over 25 pounds at maturity. Albany Realty Company will need to meet your pet before approving your lease. Immunizations/vaccination records for your pet must be up to date and a copy provided to Albany Realty Company at lease signing.

I have read and understand the above information and understand the requirements that must be met in order to be considered for leasing property from Albany Realty Company. Albany Realty Company reserves the right to accept multiple applications on any given rental property.

Applicant _____ Date _____

Address of the property you are applying for: _____



RENTAL APPLICATION

Every occupant over the age of 18 MUST fill out a separate application (even if married).
Please fill out this form COMPLETELY and sign where indicated.

PERSONAL INFORMATION			
FIRST NAME	MIDDLE	LAST	S.S.#
DATE OF BIRTH / /	Where would you like to move in?		DRIVER'S LICENSE # STATE
PHONE - -	<input type="checkbox"/> CELL <input type="checkbox"/> HOME	PHONE - -	EXT. <input type="checkbox"/> HOME <input type="checkbox"/> WORK
PRESENT HOME ADDRESS		CITY/STATE/ZIP	
LENGTH OF TIME	PRESENT LANDLORD		LANDLORD PHONE - -
REASON FOR LEAVING	AMOUNT OF RENT		Is your present rent up to date? <input type="checkbox"/> YES <input type="checkbox"/> NO
PREVIOUS HOME ADDRESS		CITY/STATE/ZIP	
LENGTH OF TIME	PREVIOUS LANDLORD		LANDLORD PHONE - -
REASON FOR LEAVING	AMOUNT OF RENT		Was your rent up to date? <input type="checkbox"/> YES <input type="checkbox"/> NO
NEXT PREVIOUS HOME ADDRESS		CITY/STATE/ZIP	
LENGTH OF TIME	NEXT PREVIOUS LANDLORD		LANDLORD PHONE - -
REASON FOR LEAVING	AMOUNT OF RENT		Was your rent up to date? <input type="checkbox"/> YES <input type="checkbox"/> NO

PROPOSED OCCUPANT(S)			
NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE

PROPOSED PET(S)			
NAME	TYPE/BREED	<input type="checkbox"/> INDOOR <input type="checkbox"/> OUTDOOR	AGE
NAME	TYPE/BREED	<input type="checkbox"/> INDOOR <input type="checkbox"/> OUTDOOR	AGE
NAME	TYPE/BREED	<input type="checkbox"/> INDOOR <input type="checkbox"/> OUTDOOR	AGE

VEHICLE(S) INFORMATION					
YEAR	MAKE	MODEL	COLOR	PLATE #	STATE
YEAR	MAKE	MODEL	COLOR	PLATE #	STATE

EMPLOYMENT		
CURRENT EMPLOYER	OCCUPATION	HOURS/WEEK
SUPERVISOR	PHONE - -	EXT. YEARS EMPLOYED
ADDRESS		CITY/STATE/ZIP
CURRENT EMPLOYER	OCCUPATION	HOURS/WEEK
SUPERVISOR	PHONE - -	EXT. YEARS EMPLOYED
ADDRESS		CITY/STATE/ZIP

INCOME		
CURRENT INCOME \$ _____ <input type="checkbox"/> WEEKLY <input type="checkbox"/> BIWEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> YEARLY	SOURCE	PROOF OF INCOME <input type="checkbox"/> YES <input type="checkbox"/> NO
CURRENT INCOME \$ _____ <input type="checkbox"/> WEEKLY <input type="checkbox"/> BIWEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> YEARLY	SOURCE	PROOF OF INCOME <input type="checkbox"/> YES <input type="checkbox"/> NO
CURRENT INCOME \$ _____ <input type="checkbox"/> WEEKLY <input type="checkbox"/> BIWEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> YEARLY	SOURCE	PROOF OF INCOME <input type="checkbox"/> YES <input type="checkbox"/> NO

Albany Realty Company
1212 Dawson Road
Albany, GA 31707

Criminal History Records Consent Forms

The undersigned individual hereby authorizes Albany Realty Company to receive any criminal history record information pertaining to me, which may be in files of any state and/or local file.

The information below must be completed by all applicants 18 years of age and older.

Please print clearly

Date: _____

Full Legal Name: _____

Full Address: _____

Apt # _____

City: _____ State: _____

Sex: _____

D.O.B. _____ SSN: _____

Applicants Signature: _____

I, give Albany Realty Company, it's employees and/or agents consent" to contact me at any/all phone numbers; including cell phone numbers (by calling, text message, or email), for purposes connected with my lease account.

I hereby make application for a rental and certify that this information is correct. I authorize you to contact any reference that I have listed, to verify and previous rental addresses that may be listed on my credit report, conduct a criminal background check, and/or run a credit check. If application is approved and the rental property is taken off the market, the security deposit fee will be forfeited should the applicant not lease the property. I understand that any information provided on this application that proves to be false will be grounds for termination of my lease agreement.

APPLICANT'S SIGNATURE: _____

DATE SIGNED: _____

Albany Realty Company
1212 Dawson Road
Albany, GA 31707
Sabrina Key ~ Property Manager
229-883-6100 (office)
229-883-6136 (fax)

RENTAL REFERENCE FOR: _____

Address: _____

By signing below I release permission for you to verify my rental reference to Albany realty Company.

X _____
~~-----For rental office use only beyond this point-----~~

Has proper notice been given? _____ Rent Amount: _____

Any part of rent paid by Grafaf? _____ If so how much? _____

Move In Date _____ Move out Date _____

Late Payments: _____ How Many: _____ Return checks: _____ How Many: _____

Has a Writ of Possession ever been served? ____ YES ____ NO

Pets: ____ YES ____ NO Complaints: ____ YES ____ NO

What was the nature of the complaints? _____

Were good housekeeping habits displayed? ____ YES ____ NO

Was the deposited funded? ____ YES ____ NO

Would you rent to this person again? ____ YES ____ NO

Comments: _____

Verified by: _____ Title: _____

Date: _____