



Jon Grigorian
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For Office Only	
Date/Time Rec'd:	_____
Desired Move-in Date:	_____ Rent: _____
_____ Approved	_____ Denied

Lakeshore Development Company
 256 Raceway Dr, Suite 12
 Mooresville, NC 28117

APPLICATION FOR RENTALS

For Property Address: 381 Euclid Avenue, Statesville, NC 28677

Is there a Co-Applicant and / or Co-Signer to be attached with this Application? _____

*All Parties (Co-Signers included) intending to sign a lease agreement for this property **MUST** fill out an Application.*

Name of Co-Applicant and/or Co-Signer to be attached to this application: _____

Applicant Information

Full Name: _____
First Middle Last

Email Address: _____ Home Phone: _____

Cell Phone: _____ Other Phone: _____ S.S.N: _____

Date of Birth: _____ Driver License No: _____ State: _____

Are you in the Military Service? _____ Do any of the Occupants Smoke? _____

Personal Residence

Current Address: _____
Street Address City State Zip Code

Current Landlord: _____ Landlord Phone: _____ Rent Amount: _____

Reason for Moving: _____ *Time at Address: _____
Years Months
(If Current Address is less than 2 years Complete the Previous Address Section Below)

Previous Address: _____
Street Address City State Zip Code

Previous Landlord: _____ Phone Number: _____ Rent Amount: _____

Reason for Moving: _____ Time at Address: _____
Years Months

Employment

Occupation: _____ Current Employer: _____

Employer Address: _____ Phone Number: _____

Time at Employer: _____
Years Months Salary: _____ Supervisor's Name: _____

References (Please list 3)

Name: _____ Phone: _____ Relationship: _____
Name: _____ Phone: _____ Relationship: _____
Name: _____ Phone: _____ Relationship: _____

Bank Information

Does the Applicant have an Account at a bank? _____ Accounts Established: _____
Bank Name: _____ Bank Phone Number: _____

Automobiles

Year: _____ Make: _____ Model: _____ Color: _____ Plate: _____
Year: _____ Make: _____ Model: _____ Color: _____ Plate: _____
Year: _____ Make: _____ Model: _____ Color: _____ Plate: _____

Occupants & Pets

*List all name(s), age(s), and relationship of all persons living in the premises with you including children:
Anyone living in the property over the age of 18 will be required to fill out an application.*

Name: _____ Age: _____ Relationship: _____
Name: _____ Age: _____ Relationship: _____
Name: _____ Age: _____ Relationship: _____
Name: _____ Age: _____ Relationship: _____
Name: _____ Age: _____ Relationship: _____
Name: _____ Age: _____ Relationship: _____

List **ALL** Pets (Number, Type, & Breed): _____

Emergency Contact

Contact Name: _____ Contact Phone: _____
Contact Address: _____ Relationship: _____

Acknowledgement & Agreement

The undersigned specifically acknowledge(s) and agree(s) that verification of any information contained in the application may be made at any time by the Landlord, its agents, successors and assigns, either directly or through a credit reporting agency, from any source named in this application. Applicant consents to Landlord submitting any information to a Landlord Verification Service Online or otherwise. It is also hereby agreed that the original copy of this application will be retained securely by the landlord even if the application is not approved.

I, the undersigned, certify that the information given herein is for the use of this landlord and is true to the best of my knowledge.

Applicant Signature: _____

Printed Name: _____ Date: _____