



Cottage Keepers, LLC
 34 E Woodrow Avenue
 P.O. Box 663
 Belmont, NC 28012
 Phone 704-829-0367
 Fax 704-973-7932

Rental Application

Address of Property Applying for: _____

Preferred Move-in Date: _____

Applicant Information:

Name: _____

First

Middle

Last

Date of Birth: _____ Social Security Number: _____

Phone Numbers: _____

Mobile

Home

Email Address: _____

Current Address: _____ City/State/Zip: _____

How long at this address? _____ Do you rent this residence? _____ Lease ending date? _____

Amount of monthly rent? _____ Reason for leaving? _____

Current Landlord Name & Phone number: _____

Previous Address: _____ City/State/Zip: _____

How long at this address? _____ Did you rent this residence? _____

Reason for leaving? _____

Current Employer: _____ Supervisor: _____

Employer Address: _____ City/State/Zip: _____

Employer Phone Number: _____ How long with this Employer? _____

Previous Employer: _____ Supervisor: _____

Employer Address: _____ City/State/Zip: _____

Employer Phone Number: _____ How long with this Employer? _____

Do you Smoke? _____ Yes _____ No

Have you ever?....

...been evicted? _____ Yes _____ No

...been convicted of a felony? _____ Yes _____ No

...filed for bankruptcy? _____ Yes _____ No

Explanation of 'Yes' responses: _____

Do you have pets? ____ Yes ____ No
If yes, please describe (included type, weight and age)_____

NOTE: If allowed, there will be an additional non-refundable fee required for pets housed on premises.

Additional Occupants (Include name, age and relationship to applicant):

Income:

Gross Monthly Employment Income Before Deductions: _____
Gross Monthly Income From Other Sources (average): _____
Total: _____

Applicant Emergency Contact Information:

Contact in Emergency (Name): _____ Relationship: _____
Emergency Contact Address: _____ Phone Number: _____

Applicant Personal References:

Name: _____ Relationship: _____
Address: _____ Phone Number: _____
Known this reference how long? _____

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I hereby certify and affirm that all information provided above is true and correct. I fully understand that my lease or rental agreement may be terminated if I have made any false, misleading or incomplete statement(s) in this application. I hereby authorize verification of all information provided in this application, including financial and credit information, via credit bureaus and/or contact with current and previous employers, current and previous landlords and personal references.

Applicant

Date

Non-refundable application fee of \$50 for 1 applicant. \$75 for 2 applicants. Fee is due at time application is submitted. Application will NOT be processed until fee is received. Check, money order or cash is accepted.

Co-Applicant Information:

Name: _____
First Middle Last

Date of Birth: _____ Social Security Number: _____

Phone Numbers: _____
Mobile Home

Email Address: _____

Current Address: _____ City/State/Zip: _____

How long at this address? _____ Do you rent this residence? _____ Lease ending date? _____

Amount of monthly rent? _____ Reason for leaving? _____

Current Landlord Name & Phone number: _____

Previous Address: _____ City/State/Zip: _____

How long at this address? _____ Did you rent this residence? _____

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Income:

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Co-Applicant Emergency Contact Information:

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