

# IDEAL SERVICING COMPANY, INC.

PO Box 725087, Atlanta, GA 31139  
770.615.3168 office; 770.615.3167 facsimile; [www.idealservicing.com](http://www.idealservicing.com)

## RENTAL APPLICATION

**Please email the completed application with a copy of your driver's license and social security card to [elisa@idealrealtyco.com](mailto:elisa@idealrealtyco.com) or fax to 770.615.3167. A \$30 application fee must be received in order for application to be processed. Thank you.**

NAME \_\_\_\_\_  
First Middle Last

CO-APPLICANT \_\_\_\_\_  
First Middle Last

PRESENT ADDRESS \_\_\_\_\_  
Street City State Zip Code

TELEPHONE (\_\_\_\_) \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

EMAIL \_\_\_\_\_

SOCIAL SECURITY NO. \_\_\_\_\_ DRIVERS LIC.# \_\_\_\_\_

NAMES AND AGES OF ALL PERSONS TO RESIDE IN HOUSE

\_\_\_\_\_

\_\_\_\_\_

### EMPLOYMENT HISTORY (Last Five Years) – USE REVERSE SIDE IF NECESSARY

PRESENT EMPLOYER \_\_\_\_\_

SUPERVISOR'S NAME \_\_\_\_\_ TELEPHONE (\_\_\_\_) \_\_\_\_\_

ADDRESS \_\_\_\_\_  
Street City State Zip Code

GROSS SALARY \_\_\_\_\_ JOB TITLE \_\_\_\_\_

DATE EMPLOYED \_\_\_\_\_

FORMER EMPLOYER \_\_\_\_\_

TELEPHONE (\_\_\_\_) \_\_\_\_\_

ADDRESS \_\_\_\_\_  
Street City State Zip Code

GROSS SALARY \_\_\_\_\_ JOB TITLE \_\_\_\_\_ PERIOD

EMPLOYED From \_\_\_\_\_ To \_\_\_\_\_

**CO-APPLICANT INFORMATION**

SOCIAL SECURITY NO. \_\_\_\_\_ DRIVERS LIC.# \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

PRESENT EMPLOYER \_\_\_\_\_

SUPERVISOR'S NAME \_\_\_\_\_ TELEPHONE (\_\_\_\_) \_\_\_\_\_

ADDRESS \_\_\_\_\_  
Street City State Zip Code

GROSS SALARY \_\_\_\_\_ JOB TITLE \_\_\_\_\_

EMPLOYED From \_\_\_\_\_ To \_\_\_\_\_

**OTHER INFORMATION**

OTHER INCOME (Both Applicants)  
\_\_\_\_\_

AUTOMOBILE Year \_\_\_\_\_ Make \_\_\_\_\_ Color \_\_\_\_\_ License \_\_\_\_\_

Year \_\_\_\_\_ Make \_\_\_\_\_ Color \_\_\_\_\_ License \_\_\_\_\_

HOW MANY PETS DO YOU HAVE? \_\_\_\_\_ WHAT TYPE? \_\_\_\_\_

DO YOU HAVE A WATERBED? \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A FELONY? \_\_\_\_\_

IF SO, PLEASE EXPLAIN \_\_\_\_\_

**IN CASE OF EMERGENCY NOTIFY :**

\_\_\_\_\_  
Name Relationship

ADDRESS \_\_\_\_\_  
Street City State Zip Code

PHONE \_\_\_\_\_ REFERRED BY \_\_\_\_\_

**LAST TWO PLACES OF RESIDENCE (MANDATORY)**

- | Dates From/To | Address | Landlord/Manager Name & Phone no. |
|---------------|---------|-----------------------------------|
| 1. _____      | _____   | _____                             |
| 2. _____      | _____   | _____                             |

**CREDIT REFERENCES**

NAME	ADDRESS	ACCOUNT NO.	PAYMENTS
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**CHECKING**

BANK \_\_\_\_\_ BRANCH \_\_\_\_\_  
ACCOUNT NO. \_\_\_\_\_

**SAVINGS**

BANK \_\_\_\_\_ BRANCH \_\_\_\_\_  
ACCOUNT NO. \_\_\_\_\_

Applicant represents that all the above statements are true and correct and hereby authorizes verification of the above items including, but not limited to, the obtaining of a credit report and agrees to furnish additional credit references upon request.

Applicant agrees that Management shall not be liable for any delay in the date said unit is ready for occupancy. First month rent and security deposit, must be paid by cashiers check or money order prior to move-in. No pets, please.

M.I. DATE \_\_\_\_\_

**Ideal Servicing Company Inc. – AGENT FOR OWNER**

Applicant (1) \_\_\_\_\_  
date

BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Applicant (2) \_\_\_\_\_  
date