

Office Use Only

Lease: _____

Move-In: _____

Sec. Dep: _____

Pro-Rate Rent: _____

Pet Fee: _____

App Fee: _____

Employee Initials: _____

**RENTAL APPLICATION***Please Print*

Application Fee: \$40.00 Applicant / \$55.00 two applicants (Non-Refundable)

Proof of Income and Valid Picture ID required

SMOKING IS NOT PERMITTED IN ANY OF OUR PROPERTIES!**** ALL LEASE TERMS ARE FOR 12 Months UNLESS OTHERWISE STATED ****

Deposit must be paid in full and Lease must be signed within 24 hours of approval.

APPLICANT INFORMATION

Name: _____ Telephone Number: _____

Email Address: _____

Social Security #: _____ Date of Birth: _____ Driver's License #: _____

Current Address: _____

City: _____ State: _____ Zip Code: _____

Landlord: _____ Landlord Phone: _____

Previous Address: _____

City: _____ State: _____ Zip Code: _____

Landlord: _____ Landlord Phone: _____

Employer: _____ Position: _____ How Long: _____ Gross Income: _____

Emergency Contact Name: _____ Phone No: _____ Relationship: _____

CREDIT INFORMATION

Have you ever filed Bankruptcy? _____ If yes, when? _____

Have you ever been evicted or broken a lease? _____ If yes, why? _____

Are you a registered sex offender? _____

Have you ever been convicted of a felony? _____ If yes, give reason of conviction: _____

How did you find out about Waddell Realty Co? _____

Desired Property: _____ Desired Move-in Date: _____ Monthly Rent: _____

Occupants (Name & Relationship)

Number of Occupants: Adults _____ Children _____

(Name) (Relationship) (Age)

(Name) (Relationship) (Age)

(Name) (Relationship) (Age)

(Name) (Relationship) (Age)

Do you have any pets? _____ If Yes: Cat _____ Dog _____ Breed _____ Approximate Weight: _____

Reference Name: _____ Phone No: _____ Relationship: _____

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Applicant authorizes verification of any/all information on this application including authorization to obtain a credit report and criminal background check. All such information will be kept confidential by Waddell Realty Company, LLC. Applicant represents that the information set forth on this application is true and complete to the best of their knowledge. Material misrepresentations on this application will constitute a default under the Rental Agreement between the parties. The landlord or his agent will either accept or reject this application. Applicant hereby waives any claims for damages by reason of non-acceptance of this application, which Landlord or his/her agent may reject without stating any reason whatsoever for doing so.

Applicant Signature: _____ Date: _____



CO-APPLICANT - RENTAL APPLICATION

Please Print

Application Fee: \$40.00 Applicant / \$55.00 two applicants (Non-Refundable)

Proof of Income and Valid Picture ID required

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Deposit must be paid in full and Lease must be signed within 24 hours of approval.

CO-APPLICANT INFORMATION

Name: _____ Telephone Number: _____

Email Address: _____

Social Security #: _____ Date of Birth: _____ Driver's License #: _____

Current Address: _____

City: _____ State: _____ Zip Code: _____

Landlord: _____ Landlord Phone: _____

Previous Address: _____

City: _____ State: _____ Zip Code: _____

Landlord: _____ Landlord Phone: _____

Employer: _____ Position: _____ How Long: _____ Gross Income: _____

Emergency Contact Name: _____ Phone No: _____ Relationship: _____

CREDIT INFORMATION

Have you ever filed Bankruptcy? _____ If yes, when? _____

Have you ever been evicted or broken a lease? _____ If yes, why? _____

Are you a registered sex offender? _____

Have you ever been convicted of a felony? _____ If yes, give reason of conviction: _____

How did you find out about Waddell Realty Co? _____

**** ALL LEASE TERMS ARE FOR 12 Months UNLESS OTHERWISE STATED****

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Co-Applicant Signature: _____ Date: _____



**#1 Bradley Park Ct.
Columbus, GA 31904
Office: (706) 653-1999 Fax: (706) 256-1152**

Rental History Verification

The following tenant has made application with Waddell Realty co. LLC.
We appreciate any information you can provide us to determine their eligibility. Please fax back to 706-256-1152.

Tenant: _____

Address: _____

Move in date: _____ Move out date: _____

Number of late payments: _____ Dispossession: _____ NSF: _____

Rent amount: _____ Number of Occupants: _____

Number of pets: _____ What kind: _____

Do they owe money: _____ How much: _____

Notice given: _____ Any complaints: _____

Information provided by: _____

Title: _____ Date: _____

Thank you for your cooperation and assistance.

Tenant Print: _____

Tenant Signature: _____

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