

WGP Properties Lease Application

Please note: You must send a \$60 application fee before we review your application. Please mail us the fee and this application or bring it to our office at the following address:

**WGP Properties
1025 East Firetower Road
Winterville, NC 28590**

SHORT TERM LEASES (LESS THAN ONE YEAR) DO NOT QUALIFY OF ANY PROMOTIONS

I would like to move in no later than _____ How did you hear about WGP Properties? _____

My email address is _____

Property:

- | | | |
|--|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> Belle Meade | <input type="checkbox"/> Quail Ridge | <input type="checkbox"/> Summerhaven |
| <input type="checkbox"/> Tower Village | <input type="checkbox"/> Eastgate | <input type="checkbox"/> Park West |
| <input type="checkbox"/> South Square | <input type="checkbox"/> Whitebridge | <input type="checkbox"/> College Park |
| <input type="checkbox"/> Elkin Ridge | <input type="checkbox"/> Forbes Woods | |

PERSONAL INFORMATION

Last Name: _____ First Name: _____ Middle Initial: _____

SSN: _____ Phone Number: _____ Date of Birth: _____

Driver's License #: _____ State of Issue: _____ Marital Status: _____

Spouse Last Name: _____ Spouse First Name: _____ Spouse Middle Initial: _____

Spouse SSN: _____ Spouse Date of Birth: _____

Driver's License #: _____ State of Issue: _____

ALL OTHER OCCUPANTS OF THIS UNIT PLEASE LIST BELOW:

1. _____ 2. _____
3. _____ 4. _____

ADDRESS INFORMATION

Present Address: _____

City: _____ State: _____ Zip: _____

How long have you been at the present address? _____

Name of Current Landlord: _____ Landlord's Phone Number: _____

Previous Address: _____

City: _____ State: _____ Zip: _____

How long were you at your previous address? _____

Name of Previous Landlord: _____ Landlord's Phone Number: _____

EMERGENCY CONTACT INFORMATION

Name of Closest Relative: _____ Relative's Phone Number: _____

Relatives Address: _____

City: _____ State: _____ Zip: _____

EMPLOYMENT INFORMATION

Name of Current Employer: _____ Employer's Phone Number: _____

Address of Current Employer: _____

City: _____ State: _____ Zip: _____

Position: _____ How Long Employed? _____

Name of Spouse's Employer: _____ Employer's Phone Number: _____

Address of Spouse's Employer: _____

City: _____ State: _____ Zip: _____

Position: _____ How Long Employed? _____

GROSS MONTHLY INCOME INFORMATION

Wages, Salaries, & Tips: \$ _____ per month

Other Income: \$ _____ per month

Total Monthly Income: \$ _____ per month

BANKING INFORMATION

Name and Location of your bank: _____ Phone #: _____

Do you have a checking account? Yes No Account #: _____

Do you have a savings account? Yes No Account #: _____

Pets? (number/type/weight): _____

Have you ever been convicted of any offense?: _____

To qualify, the monthly rental rate for this unit should not exceed your gross weekly income. I have read the above and understand the above information. I also give WGP Properties the permission to verify all given information on this application. I further understand that the lease, if signed, based on information given on this application, will be revoked and terminated at the discretion of the Lessor, if any of the information in this application is found to be false or misleading.

Applicant

____/____/____
Date

Spouse

____/____/____
Date