

Fax 336-227-1878

Email:burlingtonrentalsnc@gmail.com

By submitting this application, you are directing and authorizing Burlington Rentals and Property Management, Inc. to verify this information and obtain additional background information about you through any means, including using a third party consumer agency such as Appfolio, Inc., 55 Castillian Dr. Goleta CA 93117, 866-648-1536, personal and professional references, employers and other rental housing owners. You further direct and authorize Burlington Rentals and Property Management, Inc. to obtain from any law enforcement agency, present or past employer or supervisor, landlord, finance bureau/office, credit bureau, collection agency, college, university or other institute of learning or certification, private business, military branch or the national personnel records center, personal reference and/or other persons, and authorize the same to give records or information that they may have concerning your criminal history, motor vehicle/driving history, earnings history, credit history, character, general reputation, personal characteristics, mode of living, employment records, record of attendance, and earned degrees or certificates, or any other information requested, whether the said records are private or public, and including those which may be deemed to be privileged or confidential in nature and you irrevocably and unconditionally release all such persons, including any named or unnamed informant, from any liability resulting from the furnishing of this information.

I also agree that I have been informed that Burlington Rentals and Property Management, Inc. will obtain a CREDIT REPORT and CRIMINAL RECORD report. They may also obtain EMPLOYMENT VERIFICATION, LANDLORD REFERENCES, and any other reports they see fit to determine my status as an applicant.

\$35.00 NON REFUNDABLE APPLICATION FEE PER PERSON 18 YEARS OF AGE OR OLDER

	MAIN APPLICANT			
Full Name:	DOB	: Single/Married		
SS#	Driver License#	State:		
Present Address:		Monthly Rent/Payment:		
City, State, Zip:				
Cell Phone:	Work:			
Home:	Email:			
Employer:	Employed Since:	Position:		
Supervisor name:	Monthly Income:\$	Per Month		
	CO APPLICANT			
Full Name:	DOB:_	Single/Married		
SS#	Driver License#	State:		
Present Address:		Monthly Rent/Payment:_		
City, State, Zip:				
Cell Phone:	Work:			
Home:	Email:			
Employer:	Employed Since:	Position:		
Supervisor name:	Monthly Income:\$	Per Month		

Address:		Occupancy Dates	:	_Landlord:_			
City, State, Zip:		Landlord Contact#:					
Address:		Occupancy Dates	:	_Landlord:			
City, State, Zip:		La	Landlord Contact#:				
		Occupants of Househ	old				
List all all who would b		ALL ADULTS must fill out Application					
Number of Adults:	Number of Chi	dren					
Names of Children of o	other occupants:						
Name:		DOB:	Relationship				
Name:		DOB:	Relationship_				
Name:		DOB:	Relationship_				
Name:		DOB:	Relationship_				
PETS: YES / NO H	ow Many:	Pets may not be allow NOT be allowed at all.		applied for	, certain breeds will		
Pet:	Breed:	Weight	Age:		Indoor / Outdoor		
Pet:	Breed:	Weight	Agc: Age:		Indoor / Outdoor		
Have you ever been a defendant in an unlawful detainer (Eviction) law Rental agreement or lease? Have you ever been convicted of a crime? Have you ever filed a lawsuit against a landlord? Do you have a waterbed, Aquarium, or any other water filled furniture				re to perfor Yes Yes Yes Yes	No No No		
-	on any answers						
Have you ever served	in the Military?	YesNo					
If Yes. Which branch o	f the Military and years of	service?					
You will not automat	cally be declined for answ	rering Yes to any question	ns. All other factors	s are taken	into consideration		
** Verification of Emplo	oyment, Salary and copy o	f Driver's License will be	required at time of	f application	1**		
Premises Applied For:	Requested Move In Date:						
Main Applicant Signature:			Date:				
Co Applicant Signature	ə:			_Date:			