Rental Application

All adult applicants (18 years or older) must complete a separate rental application.

Lessee(s) must provide a copy of their driver's license/photo ID, social security card, and proof of income

Properties

Winfield MHC
825 Lower Ty Ty Rd, Ty Ty, GA 31795
Phone: (229) 445-8648
Contact Email: office@winfieldmhc.com

- -

Applicant Details

Full Name: ____

First MI Last Suffix

Social Security Number (SSN): ______________________DOB: _____/_____/________

Driver's License Number: __________________________State ___________________

Email: _____________________________________ Cell Phone: _____________________

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Co-Applicant (if applicable, the co-applicant must complete and attach a separate application.)

Full Name: ____

First MI Last Suffix

- -

Additional Occupants

List all other residents who will be occupying the home.

Name: ______________________________ Relationship: ____________

DOB: _____ / _____ / _____ SSN: _____________________________

Name: ______________________________ Relationship: ____________

DOB: _____ / _____ / _____ SSN: _____________________________

Name: ___________________________________ Relationship: ______________

DOB: _____ / _____ / _____ SSN: __________________________________

Name: ___________________________________ Relationship: ______________

DOB: _____ / _____ / _____ SSN: __________________________________

Name: ___________________________________ Relationship: ______________

DOB: _____ / _____ / _____ SSN: __________________________________

- -

Applicant Personal References

Full Name: ____

Email: ____ Phone: __________________

Full Name: ____

Email: ____ Phone: __________________

- -

Vehicle Information

Make:_____________ Model: ________________ Year: _____ Color: ________ Plate #: ____________

Make:_____________ Model: ________________ Year: _____ Color: ________ Plate #: ____________

Make:_____________ Model: ________________ Year: _____ Color: ________ Plate #: ____________

Make:_____________ Model: ________________ Year: _____ Color: ________ Plate #: ____________

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Pets

Each pet requires a non-refundable $250.00 deposit and a $20.00 per month fee. Dogs over 20 lbs. are not allowed.

Type (Cat, Dog, etc.) _____________________________ Breed: _________________________________

Type (Cat, Dog, etc.) _____________________________ Breed: _________________________________

Emergency Contact

Primary Person to Notify: ____

Relationship: _______________________________________ Phone: ______________________

Secondary Person to Notify: ____

Relationship: _______________________________________ Phone: ______________________

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Current Address

Address:____

Address City State Zipcode

From: ____________ To: _____________ (if less than 3 years, please complete previous address)

Landlord Name: _______________________________________ Monthly Payment: _____________

Landlord Phone: __________________ Landlord Email: ____________________________________

Previous Address

Address: ____

Address City State Zipcode

From: ____________ To: _____________

Landlord Name: _______________________________________ Monthly Payment: _____________

Landlord Phone: __________________ Landlord Email: ____________________________________

- -

Employment

Current Employer: ____

Address: ____

Position: ___________________________________ From: ______________ To: _______________

Supervisor: ____ Phone: ____________________

Monthly Gross Salary: __________________

(If with current employer less than 3 years, complete the following section)

Previous Employer: ____

Address: ____

Position: _____ From: _____ To: _____

Supervisor: _____ Phone: _____

Monthly Gross Salary: _____

Other Income Source: _____ Amount: _____

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Additional Information

Have you ever filed for bankruptcy? _____

If yes, provide details: _____

_____

_____

Have you ever been evicted? _____ If yes, please explain: _____

_____

_____

Has any applicant or occupant ever been convicted of a felony? _____

If yes, provide details: _____

_____

_____

Disclosure

1. The Owner, Manager, or their agent (hereinafter “Landlord”) is Sonoma Group Ty Ty LLC. dba Winfield MHC, with offices located at 825 Lower Ty Ty Rd, Ty Ty, GA 31795.

2. Applicant(s) understands that the Landlord will not be bound by any representations, agreements or promises, written or oral, made by Landlord unless contained with the Rental Agreement signed by both Tenant and Landlord at such time an offer of tenancy has been extended to Applicant after being processed according to the procedures below.

3. Applicant(s) hereby consent to allow the Landlord to obtain credit information, criminal history, and related information regarding the applicant(s) for the purpose of determining whether or not to enter into a lease with the applicant(s).

Applicant(s) understand that Landlord shall have a continuing right to review applicant's credit information, rental application, payment history, occupancy history, criminal background history and related information for account review purposes and for improving application methods.

4. Applicant(s) hereby declares that all information provided on this Rental Application is complete, true, and correct to the best of his/her/their knowledge. Applicant(s) hereby authorizes the Landlord to verify any information at any time contained in this application, including but not limited to, verification of current residency, employment, and credit. This application is for preliminary screening use only and does not obligate Landlord to execute a rental agreement or deliver possession of the premises. Applicant(s) further acknowledges that, upon landlords' discovery, any false or fraudulent information contained herein will immediately void this application and terminate any rental agreement.

5. Applicant(s) understand that Applicant(s) acquire no rights to the premises until the full execution of a rental agreement in the form submitted and deposit of rent and security deposit as required and outlined on the Rental Agreement.

6. Approval or denial for residency is made without regard to race, color, religion, sex, national origin, age, gender identity or expression, familial status, sexual orientation, ancestry, or handicap.

Applicant Signature: _____

Print Applicant Name: _____

Date: _____ Time: _____