

SPRUILL PROPERTY MANAGEMENT

1016 F Louisville Street
Starkville, MS 39759
(662) 323-5234/323-5256 FAX

Date Needed _____

Washer/Dryer Needed: YES NO

Professional Application

Name: _____

Children: YES NO

SSN: _____

Name(s) & Age(s) _____

DOB: _____

D.L. & State: _____

Pets: YES NO

*Must complete pet application and pay \$200.00 non-refundable pet deposit and \$20 extra/mo./pet

Type of Vehicle: _____

Tag # & State: _____

Phone: _____

Present Address: _____

Cell Phone: _____

Email Address: _____

How Long: _____

Are you a smoker or is anyone in your household a smoker? YES NO

*Subject to an additional \$10.00 per month charge

Spouse: YES NO

*If YES complete additional information---if NO skip to next section

Name: _____

Present address: _____

SSN: _____

DOB: _____

How Long: _____

D.L. & State: _____

Phone: _____

Type of Vehicle: _____

Cell Phone: _____

Tag Number & State: _____

Email address: _____

Preferred Rental desired:

Rental Price Range \$ _____

Rental Due Date

Old fashioned method Monthly _____ Payday plan (bi-weekly) _____ Other alternative (weekly/quarterly) _____

Style

One bedroom _____ Two bedroom _____ Three bedroom _____

Flat floorplan _____ Townhouse floorplan (with stairs) _____

Location/Area

Garrard Road _____ Gillespie Street _____ Greensboro Street _____ Yellowjacket Drive _____ South Park _____

***Preferred Method of Payment:**

Charge Card _____ Check _____ Money Order _____ Cash _____

Professional Application continued

Current Employment (address & phone):

Spouse Employment (address & phone):

Address: _____

How Long: _____ **Monthly Income:** _____

How Long: _____ **Monthly Income:** _____

Rental References: Present Landlord (if applicable): _____

If leasing currently in Starkville, why are you leaving your current apartment? _____

Credit References: (Bank, Credit Card, etc.)

First Emergency Contact: _____

Relationship: _____ **Address:** _____

Phone Number: _____

Second Emergency Contact: _____

Relationship: _____ **Address:** _____

Phone Number: _____

Name of nearest living relative: _____

Address: _____

Phone Number: _____

Professional Application cont'd

Please let us know how you found out about Spruill Property Management. Check all that apply.

- | | |
|--|---|
| <input type="checkbox"/> Starkville Daily News | <input type="checkbox"/> The Apartment Guide |
| <input type="checkbox"/> The Reflector | <input type="checkbox"/> The Bulldog Bluff |
| <input type="checkbox"/> Maroon & White Magazine | <input type="checkbox"/> University Directories |
| <input type="checkbox"/> Greater Development of Starkville Partnership | <input type="checkbox"/> Current tenant (Name: _____) |
| <input type="checkbox"/> Online. If checked, please state which website or search. _____ | |
| <input type="checkbox"/> Other _____ | |

Thank you for completing this application to rent from us. Please sign below. Please note that a completed application form requires submission of the following, which will be copied and attached to this application:

- | | |
|--|--|
| <input type="checkbox"/> Driver's license (picture ID) | <input type="checkbox"/> Two (2) weeks most current pay stub |
| <input type="checkbox"/> Personal check (to verify bank) | <input type="checkbox"/> If self-employed some proof of current income |

***Upon completion of this application, a non-refundable fee of \$25.00 is due in order to complete processing. Once an application has been completed and an applicant accepted, there will be a holding fee of \$350.00 to hold an apartment for you. This fee will be forfeited if you elect not to rent from us once an apartment lease is tendered to you. If you elect to rent from us then the holding fee will be applied to the amount which will be due for a security deposit upon the signing of the lease. If we are unable to offer you any apartment rental option then the holding fee will be returned to you in full.

I understand that I am obligated to execute a lease when it is tendered to me. If I fail or refuse to execute such lease, I understand and agree that the reserve holding fee will be forfeited and retained as liquidated damages by Spruill Townhouses for its efforts in processing this application. I hereby grant permission for a credit and/or reference check as witnessed by my signature below.

I WARRANT THAT THE ABOVE INFORMATION IS TRUE AND CORRECT AND AGREE TO THESE TERMS AND CONDITIONS WHICH I HAVE READ AND UNDERSTAND.

SIGNATURE _____ DATE _____

Application accepted by: _____

NOTES: _____

