

THORNTON PROPERTIES
265 Chastaine Circle
Birmingham, Alabama 35209
(205)942-1989 FAX: (205) 942-2479

APPLICATION FEE: \$75.00 PER APPLICATION
Cash or Money Order

The undersigned, upon the basis of this statement, makes application to rent housing accommodations designated as Apartment# _____ on the _____ floor, the rental which is \$ _____ per month and upon approval by the owner of this application, agrees to sign rent or lease agreement in the form hereto attached.

NAME: _____ SOC. SEC. # _____ DATE OF BIRTH: _____
SPOUSES NAME: _____ SOC. SEC. # _____ DATE OF BIRTH: _____
IF MARRIED, # OF YEARS: _____ CHILDREN (NAMES & AGES): _____
PRESENT ADDRESS: _____ CITY _____ ST _____ ZIP _____
HOW LONG? _____ PHONE _____

OWN OR RENT: _____ IF RENTAL, WHO IS AGENT OR OWNER & PHONE #: _____
PREVIOUS ADDRESS: _____ HOW LONG? _____

REASON FOR VACATING PLACE OF RESIDENCE: _____

NAME OF EMPLOYER: _____ ADDRESS: _____

NAME OF SUPERVISOR: _____ PHONE #: _____

NATURE OF EMPLOYMENT: _____ LENGTH OF EMPLOYMENT: _____

MONTHLY INCOME: _____ FROM SALARY: _____ FROM COMMISSION: _____

OTHER SOURCES OF INCOME: _____ MONTHLY AMOUNT: _____

SPOUSES EMPLOYER: _____ ADDRESS: _____

NAME OF SUPERVISOR: _____ PHONE #: _____

MONTHLY INCOME: _____ LENGTH OF EMPLOYMENT: _____

NO MORE THAN _____ PERSONS WILL OCCUPY THE APARTMENT.

_____ ADULTS _____ CHILDREN

NO MORE THAN _____ AUTOMOBILES WILL BE KEPT ON PREMISES.

MAKE & MODEL OF VEHICLES: _____

I (we) hereby agree that no other person or persons except the above named will occupy the demised premises at any time without the consent of the management in writing.

NAME AND ADDRESS OF NEAREST RELATIVE NOT LIVING WITH YOU: _____

Any receipt given for a deposit on the above property or for the first month's rent is issued subject to approval and acceptance of this application. If application is accepted no refund will be made. Deposit for said Apartment subject to refund, less any cost incurred, in the event said application is not approved. One full months rent must be paid, lease signed and approved in advance before occupancy of the property. All rent is due and payable in advance at our office on the first day of the month. I (we) hereby agree that all adults residing in the Apartment are Jointly-Severally liable for all rent and damage incurred during the term of occupancy. Applicant represents that statements above made are true and correct and hereby authorizes verification of references given.

To comply with the Fair Credit Reporting Act, this is to inform you that a credit investigation involving the statements made on this application for tenancy of this apartment community is being initiated. I further authorize Thornton Properties to obtain credit reports, rental history and work history as needed to verify all information put forth in this application. Thornton Properties reserves the right to terminate at its election if any person knowingly or willingly makes fraudulent statements on this application. It is illegal and against our policy to discriminate against any person because of race, religion, color, sex, national origin or disability.

DATE: _____, 20 _____ SIGNATURE: _____

DATE OCCUPANCY DESIRED: _____ DRIVER LICENSE NO.: _____

FOR OFFICE USE ONLY:

COPY OF DRIVER'S LICENSE AND/OR SOC. SEC. CARD

POWER APPLIED FOR: _____ GAS APPLIED FOR: _____

