

# Calico Apartments



App Fee \$40.00

Type in the information on your computer screen, then print and fax this application to the fax number listed on page 2. We do not recommend E-mailing personal information.

## APPLICANT 1

Full Name \_\_\_\_\_ Birth Date: \_\_\_\_\_

SSN \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Driver Lic No \_\_\_\_\_ State \_\_\_\_\_

*CURRENT RESIDENCE*

*PREVIOUS RESIDENCE*

Phone No. \_\_\_\_\_

Address \_\_\_\_\_

City/State Zip \_\_\_\_\_

Landlord Name \_\_\_\_\_

Landlord Phone \_\_\_\_\_

How Long \_\_\_\_\_ Mo Rent \_\_\_\_\_

*CURRENT EMPLOYMENT*

*PREVIOUS EMPLOYMENT*

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City/State Zip \_\_\_\_\_

Supervisor \_\_\_\_\_

Position \_\_\_\_\_

How Long \_\_\_\_\_ Phone No. \_\_\_\_\_

Income \_\_\_\_\_ Per \_\_\_\_\_

**BANK INFORMATION**    **NAME**    **BRANCH**    **ACCOUNT NO**    **TYPE**

## APPLICANT 2

Full Name \_\_\_\_\_ Birth Date: \_\_\_\_\_

SSN \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Driver Lic No \_\_\_\_\_ State \_\_\_\_\_

*CURRENT RESIDENCE*

*PREVIOUS RESIDENCE*

Phone No. \_\_\_\_\_

Address \_\_\_\_\_

City/State Zip \_\_\_\_\_

Landlord Name \_\_\_\_\_

Landlord Phone \_\_\_\_\_

How Long \_\_\_\_\_ Mo Rent \_\_\_\_\_

*CURRENT EMPLOYMENT*

*PREVIOUS EMPLOYMENT*

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City/State Zip \_\_\_\_\_

Supervisor \_\_\_\_\_

Position \_\_\_\_\_

How Long \_\_\_\_\_ Phone No \_\_\_\_\_

Income \_\_\_\_\_ Per \_\_\_\_\_

**BANK INFORMATION:**    **NAME**    **BRANCH**    **ACCOUNT NO.**    **TYPE**

**ADDITIONAL OCCUPANTS:** List name and relationship - include age of minor children

**EMERGENCY CONTACT: NAME/PHONE** \_\_\_\_\_

I/we declare the foregoing information is correct, and I/we hereby authorize you to conduct an employment, criminal and credit check and to verify our references.

**Applicant 1 Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Applicant 2 Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Note: Application must be recieved signed by both applicants before processing can begin.**

Calico Apartments 6535 Old Hwy 5 N.#36, Woodstock, Ga. 30188

Community Manager Ken Lemal Ph# 770-516-3616

Fax this completed application to 770-516-2192

Office Use Only

Database Inquiry Only Unit# \_\_\_\_\_ Move-In Date \_\_\_\_\_

Database & CBI Rent Quoted \_\_\_\_\_ Deposit \_\_\_\_\_

Basic Package  Intermediate Package  Deluxe Package  Premium Package  Other

VEHICLE INFORMATION

CAR #1: YEAR \_\_\_\_\_ MAKE/MODEL \_\_\_\_\_ COLOR \_\_\_\_\_ TAG# \_\_\_\_\_

CAR #2 YEAR \_\_\_\_\_ MAKE/MODEL \_\_\_\_\_ COLOR \_\_\_\_\_ TAG# \_\_\_\_\_

CAR #3 YEAR \_\_\_\_\_ MAKE/MODEL \_\_\_\_\_ COLOR \_\_\_\_\_ TAG# \_\_\_\_\_

CREDIT REFERENCES

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ ACCT# \_\_\_\_\_ BAL \_\_\_\_\_

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ ACCT# \_\_\_\_\_ BAL \_\_\_\_\_

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ ACCT# \_\_\_\_\_ BAL \_\_\_\_\_

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ ACCT# \_\_\_\_\_ BAL \_\_\_\_\_

PERSONAL REFERENCES

NAME : \_\_\_\_\_ PHONE \_\_\_\_\_ YEARS KNOWN \_\_\_\_\_

NAME : \_\_\_\_\_ PHONE \_\_\_\_\_ YEARS KNOWN \_\_\_\_\_

NAME : \_\_\_\_\_ PHONE \_\_\_\_\_ YEARS KNOWN \_\_\_\_\_

NAME : \_\_\_\_\_ PHONE \_\_\_\_\_ YEARS KNOWN \_\_\_\_\_