



202 Ashbury Blvd  
Mebane, NC 27302

(P) 919-563-4031  
(F) 919

**APPLICATION FOR RESIDENCY**  
*(All sections must be completed.)*

Apartment/Address of Property for Occupancy: \_\_\_\_\_

Desired Occupancy Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Desired Lease Term: \_\_\_\_\_

Applicant(s) represents that all the statements on the application for rental are true and correct and hereby authorizes verification of any and all information relating to residential history (rental or mortgage), employment history, criminal history records, court records and credit reports. Applicant acknowledges that false or omitted information herein may constitute grounds for rejection of this application, termination of occupancy and/or forfeiture of fees or deposit and may constitute a criminal offense under the laws of this State. I/We hereby release *Ashbury Square* from liability and responsibility arising from their doing so. Facsimiles of this authorization may be used to facilitate multiple inquires. In the event you receive a facsimile of this authorization it should be treated as an original and the requested information should be released to facilitate my/our application for residency.

Have you ever been convicted by a court of law? Yes \_\_\_\_ No \_\_\_\_  
Have you or your co-applicant/spouse ever been convicted for any felony offense? Yes \_\_\_\_ No \_\_\_\_

This application is for qualification purposes only and does not in any way guarantee the applicant that he/she will be offered this property. The processing fee per applicant over the age of 18 is non-refundable. **Any application with missing information will not be processed.**

Upon approval of this application applicant agrees to sign a rental or lease agreement and to pay all sums due, including any required security deposit before occupancy. If applicant does not take possession of the property the security deposit shall be forfeited.

\_\_\_\_\_  
**Applicant Signature** \_\_\_\_\_  
**Date**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Drivers License #: \_\_\_\_\_ State: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Work Phone Number: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Attach Copy)

Present Address: \_\_\_\_\_

City: \_\_\_\_\_ State : \_\_\_\_\_ Zip: \_\_\_\_\_

From: \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Owner/Mgr: \_\_\_\_\_ Owner/Mgr Phone#: \_\_\_\_\_

Reason for moving: \_\_\_\_\_ Rent Amount \$ \_\_\_\_\_

Previous Address: \_\_\_\_\_

City: \_\_\_\_\_ State : \_\_\_\_\_ Zip: \_\_\_\_\_

From: \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Owner/Mgr: \_\_\_\_\_ Owner/Mgr Phone#: \_\_\_\_\_

Reason for moving: \_\_\_\_\_ Rent Amount \$ \_\_\_\_\_

List additional persons residing at property: (List age if under 18)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMPLOYMENT**

Current Monthly Gross Income \$ \_\_\_\_\_ Present Occupation: \_\_\_\_\_

Employment Dates: From: \_\_\_/\_\_\_/\_\_\_ To: \_\_\_/\_\_\_/\_\_\_

Employer/Company: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor Contact No. (\_\_\_\_\_) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

(If employment is less than 2 years please provide the following)

Past Monthly Gross Income \$ \_\_\_\_\_ Previous Occupation: \_\_\_\_\_

Employment Dates: From: \_\_\_/\_\_\_/\_\_\_ To: \_\_\_/\_\_\_/\_\_\_

Past Employer/Company: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor Contact No. (\_\_\_\_\_) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

If military – what rank? \_\_\_\_\_

Automobile: Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ License # \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ License # \_\_\_\_\_

Other Vehicles (Motorcycles, boats, RVs, etc.) \_\_\_\_\_

Pets? Yes \_\_\_ No \_\_\_ Describe: \_\_\_\_\_

Personal Reference: \_\_\_\_\_ Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

In case of emergency contact: \_\_\_\_\_ Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

**OFFICE USE ONLY**

APPROVED DATE: \_\_\_/\_\_\_/\_\_\_ DISAPPROVED DATE: \_\_\_/\_\_\_/\_\_\_ LEASING AGENT \_\_\_\_\_  
(DATE ADVERSE ACTION LETTER MAILED: \_\_\_/\_\_\_/\_\_\_)

APPLICATION FEE \$ \_\_\_\_\_ DATE PAID: \_\_\_/\_\_\_/\_\_\_

RENT: FIRST'S MONTH \$ \_\_\_\_\_ DATE PAID: \_\_\_/\_\_\_/\_\_\_

PRORATED \$ \_\_\_\_\_ DATE PAID: \_\_\_/\_\_\_/\_\_\_  
FROM: \_\_\_/\_\_\_/\_\_\_ TO: \_\_\_/\_\_\_/\_\_\_

SECURITY DEPOSIT: \$ \_\_\_\_\_ DATE PAID: \_\_\_/\_\_\_/\_\_\_

PET FEE \$ \_\_\_\_\_ DATE PAID: \_\_\_/\_\_\_/\_\_\_

Driver's License/Government Issued Photo ID viewed for confirmation: \_\_\_\_\_