

SHOEMAKER PROPERTY MANAGEMENT, LLC

Sales - Property Management

Need: proof of income (check stubs or bank statements) and proper state ID

219 Suite F South 40th
Hattiesburg, MS 39401
Telephone (601) 268-6022

Shoemakerproperty@comcast.net

\$40.00 Application Fee/ per adult

Date: _____

Property applying for: _____

PERSONAL INFORMATION:

Name of Applicant: _____ Birth Date: _____

S.S.# _____ Age: ____ Telephone: (h) _____ (c) _____

Email Address: _____

How many Adults ____ Children ____ & ages ____ staying at property applied for?

Present Street Address: _____

City, State, Zip Code: _____

Name and Phone # of present landlord _____

How long have you lived at the present address? ____

Pets (if allowed): ____

Employer: _____ Telephone _____

Years there? ____ Monthly income: _____

SPOUSE/PARENT/ROOMMATE INFORMATION:

Name: _____ Birth Date: _____

Email: _____

Address: _____ Present Landlord name and Number: _____

Telephone: (h) _____ (c) _____ S.S.#: _____

Employer: _____ Telephone: _____ How Long? ____

Monthly income: _____

OTHER INFORMATION:

Have you ever:

Been served an eviction notice or been asked to vacate property where you were renting? yes/no

Willfully or intentionally refused to pay rent when due? yes/no

If yes, why? _____

Make/Model _____ Year _____ Color _____ Tag# _____

Make/Model _____ Year _____ Color _____ Tag# _____

REFERENCES:

Name	Relationship	Telephone
_____	_____	_____
_____	_____	_____

*****FOR OFFICE USE ONLY*****

Landlord Verification

From: _____ Phone: _____ Fax: _____

Tenant: _____ Address: _____ Monthly Rent: \$ _____

Was lease fulfilled? ____ Was proper notice given? ____ rent current? ____

Was legal proceedings filed? ____ Was residence left clean? ____ Would you re-rent to this tenant again? _____

Applicants Signature

CO-Applicants Signature

Please Fax Back to 601-268-6024