



RENTAL APPLICATION

NOTE Each adult applicant, or cosigner must complete separately.

REALITY GROUP, INC

Address	Apt. #
Rent amount	If approved, first month rent plus deposit due at lease signing.

Name	Ideal move in date
Email	Cell
Birth Date MM/DD/YYYY	Last four of social security #
	Drivers License Number

Present Address

Address (including apt. #)	City	Zip
Owner/Mgr.	Phone	From/To
Reason for moving	Total rent \$	Your portion \$

Previous Address

Address (including apt. #)	City	Zip
Owner/Mgr.	Phone	From/To
Reason for moving	Total rent \$	Your portion \$

Next Previous Address

Address (including Apt. #)	City	Zip
Owner/Mgr.	Phone	From/To
Reason for moving	Total rent \$	Your portion \$

Present Occupation	Prior Occupation (or 2 nd Occupation)	
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Company Name	Work from home? Yes No	Work from home? Yes No
Business Type	Full-time Part-time	Full-time Part-time
Address		
Occupation/Position		
Supervisor name		
Supervisor phone		
Date of employment (From ___ to ___)		
Monthly Salary	Gross Net	Gross Net

Proposed Occupants

Name	Age	Relationship	Full-time Part-time
			Full-time Part-time
			Full-time Part-time
			Full-time Part-time

Financial Information

Bank Name Branch Address

Checking Account: (Last four digits) Savings Account: (Last four digits) Approx. Balance \$

Bank Name Branch Address

Checking Account: (Last four digits) Savings Account: (Last four digits) Approx. Balance \$

Additional Information

Personal Reference (non-family) Years known Address Phone Relationship

#1

#2

Emergency Contact Name Address Phone Relationship

Vehicle(s) or Motorcycle(s) Year Make/Model Color Lic. Plate #

#1

#2

Will you have pets? If yes, what breed and weight? ESA? If yes, please provide documentation. Yes No Yes No

Below questions must be checked either yes or no.

- Yes No
- Have you ever had any credit problems?
 - Do you smoke?
 - Have you ever been evicted for non-payment of rent for any other reason, or have you had an unlawful detainer filed against you?
 - Have you ever been convicted of a felony?
 - Do you have musical instruments? If yes, what kind?

Note: All adult occupants including co-signers are equally and solely responsible for the rent. **Initial here** X _____

Applicant represents that the statements made above are true and correct and hereby authorizes verification made by Olive Branch Realty Group, Inc. Please include contact information to current owners and/ or property managers in the address sections. Please allow up to 72 hours to process a completed application.

Applicant Signature X _____ Date _____ Time _____

Tenant Information Release Form



REALITY GROUP, INC

I authorize the release of information regarding my stay at properties managed by _____.
This information includes, but is not limited to duration of stay, rent amount, payment history, apartment condition upon my departure and issues regarding compliances with policies of the housing agreement. This information may be shared with landlords with whom I am seeking tenancy or any agency conduction background checks.

Tenant Name

Tenant Email

Property Address (most recent)

State

Zip

Tenant Signature **X** _____ Date _____