



Leasing Application

Lincolnton Apartment Homes

112 Colonial Village Drive

Lincolnton, NC 28092

Office: 704-735-7580

Fax: 704-735-1220

leasing@lincolntonapartmenthomes.com

I'm Applying as a: Primary Applicant: _____ **Co-Applicant:** _____

Applicant Name: _____ **Date of Birth:** _____

Social Security Number: _____ - _____ - _____ Drivers License ID\NO: _____ State: _____

Present Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone #: _____ Mobile Phone #: _____

How long at this address: _____

May We Contact the Landlord to Confirm Rental Payment History?

Yes _____ No _____

If Yes – Landlord Name: _____ Phone: _____

Previous Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone #: _____ Mobile Phone #: _____

How long at this address: _____

May We Contact the Landlord to Confirm Rental Payment History? _____

If Yes – Landlord Name: _____ Phone: _____

Your Current Employer: _____

Position: _____ Phone #: _____

Pay Rate _____ How Long Employed: _____

May We Contact Employer to Confirm Your Employment History? _____

Your Previous Employer: _____

Position: _____ Phone #: _____

Pay Rate: _____ How Long Employed: _____

May We Contact Employer to Confirm Your Employment History? _____

List Names and Ages of Co-Occupants:

List Type and Number of Pets:

Have You, Co-Applicant, or Co-Occupants Ever Had Lease Terminated? _____

If Yes – Please Explain: _____

Have You, Co-Applicant, or Co-Occupants Ever Been Arrested or Convicted of a Crime? _____

If Yes – Please Explain: _____

List the Name and Numbers of a:

Relative: _____

Friend: _____

Vehicles That Will be on Premises

Make: _____ **Model:** _____ **Year:** _____ **Tag#:** _____

Make: _____ Model: _____ Year: _____ Tag#: _____

I hereby make application for an apartment with Lincolnton Apartment Homes. By signing below I understand that I have paid a non-refundable application fee of \$35. I certify that the information in this application is true and complete. Any false or misleading information may result in immediate termination of any future lease with Lincolnton Apartment Homes. I authorize Lincolnton Apartment Homes to verify any statement in the application through sources such as law enforcement, government agencies, credit bureaus, previous employers, and/or previous landlords.

Applicant Signature: _____ Date: _____

How Did You Hear About Lincolnton Apartment Homes?

Internet: _____ Paper _____ Family/Friends _____

Current/Former Tenant _____ Other _____

For Office Use Only

Location Application is Applying For: _____

Approved _____ Not Approved _____ Amount of Deposit: \$ _____