

Fax to: 1.252.354.2355

E-mail to: LongTerm@EIRealty.com

Emerald Isle Realty

Rental Application

VALID PHOTO ID REQUIRED

TERMS: APPLICANT CERTIFIES THAT ALL INFORMATION GIVEN TO EVALUATE THIS APPLICATION TO RENT / LEASE IS CORRECT AND COMPLETE. APPLICANT AUTHORIZES ALL INQUIRIES BY RENTAL OWNER, OWNER'S AGENT OR NATIONAL TENANT NETWORK DEEMED NECESSARY TO EVALUATE THIS APPLICATION. APPLICANT FURTHER UNDERSTANDS THAT ANY FALSE, INACCURATE, OR INCOMPLETE INFORMATION IS GROUNDS FOR IMMEDIATE REJECTION. APPLICANT SPECIFICALLY AUTHORIZES AND REQUESTS ALL PRESENT AND PREVIOUS EMPLOYERS, MORTGAGE HOLDERS, LANDLORDS, RENTAL AGENTS, CREDIT GRANTORS, BANKS, ACCOUNTANTS, STOCK BROKERS, AND ANY GOVERNMENT AGENCY TO RELEASE ANY REQUESTED INFORMATION IN THE EVALUATION OF THIS APPLICATION. THIS FORM IS PROVIDED BY NTN TO ASSIST ITS MEMBERS IN PROCESSING THEIR APPLICATIONS TO LEASE RENTAL PROPERTY. NTN SHALL NOT BE RESPONSIBLE FOR THE USE OR APPLICATION OF THIS FORM BY OTHERS OR ANY LEGAL ASPECT AS TO A LEASING / RENTAL AGREEMENT ENTERED INTO BY ANY PARTIES USING THIS FORM.

OFFICE USE ONLY:		
NTN MEMBER NAME:		ACCESS NUMBER:
TELEPHONE:	FAX:	
CONTACT:	DATE:	TIME:
REPORTS FOR: (Please Specify) <input type="checkbox"/> Applicant <input type="checkbox"/> Spouse		
REPORT TYPE(S): <input type="checkbox"/> CREDIT <input type="checkbox"/> EVICTION		
<input type="checkbox"/> DECISION POINT <input type="checkbox"/> PLUS <input type="checkbox"/> NATIONWIDE CRIMINAL <input type="checkbox"/> STATEWIDE CRIMINAL:		
STATE		
<input type="checkbox"/> FULL SERVICE (Credit, Eviction, Nationwide Criminal, Employer/Landlord Verifications)		

USE BLACK INK **PLEASE PRINT CLEARLY!** **VERIFY I.D. / SSN / ADDRESS INFO!**

Applicant:	SSN#:
LAST FIRST MIDDLE	____ / ____ / ____
Drivers Lic. # _____ State _____	DOB: ____ / ____ / ____
Cell Phone _____	E-mail _____
Spouse:	SSN#:
LAST FIRST MIDDLE	____ / ____ / ____
Drivers Lic. # _____ State _____	DOB: ____ / ____ / ____
Cell Phone _____	E-mail _____

Present Address: _____ Rent Amt: \$ _____ Reason for Leaving: _____
 City: _____ State: _____ Zip: _____ Date From _____ to _____

Current Landlord: _____ Phone: () _____ Email: _____

Previous Address: _____ Rent Amt: \$ _____ Reason for Leaving: _____
 City: _____ State: _____ Zip: _____ Date From _____ to _____

Previous Landlord _____ Phone: () _____ Email: _____

Previous Address: _____ Rent Amt: \$ _____ Reason for Leaving: _____
 City: _____ State: _____ Zip: _____ Date From _____ to _____

Previous Landlord _____ Phone: () _____ Email: _____

Has an eviction ever been filed against you? Yes / No If yes, which rental? _____

Present Employer: _____ **Main Phone:** _____
 Employer's Address: _____ Human Resource Contact: _____
 Position: _____ Date From: _____ to _____
 Military Rank: _____ Commanding Officer: _____
 Gross Income: \$ _____ per week [] month [] yr [] Other Sources of Income: _____

Spouse's Employer: _____ **Main Phone:** _____
 Employer's Address: _____ Human Resource Contact: _____
 Position: _____ Date From: _____ to _____
 Military Rank: _____ Commanding Officer: _____
 Gross Income: \$ _____ per week [] month [] yr [] Other Sources of Income: _____

Emergency Contact & Phone: _____ Emergency Contact & Phone: _____
 Personal Reference & Phone: _____ Personal Reference & Phone: _____
 Other occupants (Full Name, Birth Date, Sex): _____
 Pet Info: Type, Breed, Age, Weight, M/F, spayed/neutered, house-trained, crate-trained): _____

Auto Make	Yr	Tag #	Auto Make	Yr	Tag #	Other Vehicles? Yes	No
-----------	----	-------	-----------	----	-------	---------------------	----

If I rent the property, I understand my rental history including lease violations and information I provide on this application may be reported to and maintained by National Tenant Network for up to seven (7) years after I vacate the premises.

Applicant Signature: _____ **Date:** _____
Spouse Signature: _____ **Date:** _____