

Please complete, sign, date, and mail to:
Lura Taylor
C/O Coastal Community Action, Inc.
PO Box 729
Newport, NC 28570

RESIDENTIAL RENTAL APPLICATION

Name of Applicant _____ Telephone _____

Present Address _____

City, State, Zip Code _____

Social Security Number _____ Drivers License # _____ State _____

Spouse Social Security # _____ Spouse DL # _____ State _____

Birthdate _____ Spouses Birthdate _____

How many in your family? Adults _____ Children _____ Pets? _____

How long have you lived at the present address? _____

Name of Landlord _____ Telephone _____

Prior Landlord _____ Telephone _____

Have you ever been evicted from a rental residence? _____

Employer _____ Position _____

How long? _____ Telephone _____

Salary \$ _____ Other money you want us to consider \$ _____

Have you declared bankruptcy in the past seven (7) years? _____

Additional Personal/Credit References

Name	Relationship	Telephone
_____	_____	_____
_____	_____	_____

I represent that the information provided in this application is true to the best of my knowledge. You are hereby authorized to verify my credit and employment references in connection with the processing of this application, and to obtain a criminal background check. I acknowledge receipt of a copy of this application.

Applicant

Date

Applicant

Date