

## APPLICATION

DATE: \_\_\_\_\_  
TYPE UNIT: \_\_\_\_\_ LEASE TERM: \_\_\_\_\_  
RENT: \_\_\_\_\_ DATE OF OCCUPANCY: \_\_\_\_\_

### POSITIVE IDENTIFICATION IS REQUIRED

#### **Applicant Information:**

Full Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_  
Male: \_\_\_\_\_ Female: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Email Address: \_\_\_\_\_

Present Address: \_\_\_\_\_

From: \_\_\_\_\_ Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
To: \_\_\_\_\_ Cell Telephone Number: \_\_\_\_\_  
Own: \_\_\_\_\_ Rent: \_\_\_\_\_ Name of Landlord: \_\_\_\_\_  
Landlord's Telephone Number: \_\_\_\_\_ Monthly Payment: \_\_\_\_\_  
Mortgage Holder: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Mortgage Holder's Telephone Number: \_\_\_\_\_ Monthly Mortgage Payment: \_\_\_\_\_

Previous Address: \_\_\_\_\_

From: \_\_\_\_\_ Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
To: \_\_\_\_\_ Cell Telephone Number: \_\_\_\_\_  
Own: \_\_\_\_\_ Rent: \_\_\_\_\_ Name of Landlord: \_\_\_\_\_  
Landlord's Telephone Number: \_\_\_\_\_ Monthly Payment: \_\_\_\_\_  
Mortgage Holder: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Mortgage Holder's Telephone Number: \_\_\_\_\_ Monthly Mortgage Payment: \_\_\_\_\_

Nearest Relative Not Living With You: \_\_\_\_\_ Relationship: \_\_\_\_\_

\_\_\_\_\_ Their Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_  
In Case of Emergency: \_\_\_\_\_ Relationship: \_\_\_\_\_

\_\_\_\_\_ Their Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Name of Employer: \_\_\_\_\_ How Long? \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Position: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Are You Subject to Transfer: \_\_\_\_\_ Monthly Salary: \_\_\_\_\_ Employer's Telephone Number: \_\_\_\_\_

Previous Employment: \_\_\_\_\_ How Long? \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Employer's Telephone Number: \_\_\_\_\_

#### **Spouse / Roommate Information:**

Spouse / Roommate's Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Present Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License Number & State: \_\_\_\_\_

In Case of Emergency: \_\_\_\_\_ Relationship: \_\_\_\_\_

\_\_\_\_\_ Their Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Spouse / Roommate's Employer: \_\_\_\_\_ How Long? \_\_\_\_\_

Employer's Address: \_\_\_\_\_

\_\_\_\_\_ Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Position: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Are You Subject to Transfer: \_\_\_\_\_ Monthly Salary: \_\_\_\_\_ Employer's Telephone Number: \_\_\_\_\_

#### **Additional Occupants:**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**Total Number of Occupants:** \_\_\_\_\_

**Number of Motor Vehicles:**

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Tag number: \_\_\_\_\_  
Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Tag Number: \_\_\_\_\_  
Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Tag Number: \_\_\_\_\_

**Pet Information**

Number of Pets: \_\_\_\_\_ Type of pets: \_\_\_\_\_ Weight: \_\_\_\_\_ Age: \_\_\_\_\_

Pets must be pre-approved by the manager before they can be brought onto the property. Only one pet allowed per home.  
Guests are not allowed to have pets in the community.

**Harbor Pines Applicants**

TENANTS AT HARBOR PINES ARE REQUIRED TO CARRY **FLOOD INSURANCE**. \_\_\_\_\_  
Initial Here

**References:** Name Address City & State Telephone Number

Bank: \_\_\_\_\_  
Personal: \_\_\_\_\_  
Personal: \_\_\_\_\_

**Have you or your spouse ever been convicted of a felony?** Yes \_\_\_\_\_ No \_\_\_\_\_

**If so, explain:** \_\_\_\_\_

(A conviction will not necessarily disqualify an applicant. We will consider other facts, including the nature, time and seriousness of the offense and Evidence of your rehabilitation.)

I (we) certify that the above information is true and correct, to the best of my (our) knowledge. I (we) understand that you will retain this application whether or not it is approved. You are authorized to check my credit, employment, character, general reputation, personal references and if deemed necessary, a criminal investigation. I (we) certify that I (we) are adults (over the age of 21) and I (we) understand the importance of accurate information. Failure to answer all the questions on this application or to answer incorrectly could be grounds for immediate eviction. I (we) further understand that approval of this application is based on all or in part on the information contained herein. Should this application be approved and a lease contract be executed, I (we) further understand that this application is made part of the lease and if later, it is determined that any information provided herein was incorrect, said incorrect information shall be grounds for termination of the remainder of the lease contract. It is understood that this is a private community with rules and regulations. A copy of which I (we) received at the time of application and I (we) hereby agree to abide by these regulations if application is approved and residency is established. I (we) understand I (we) acquire no rights in a unit until:

- (1) approval and acceptance of this application,
- (2) sign a lease in the form submitted to me and make a deposit of \$ \_\_\_\_\_ and / or a non-refundable entry fee of \$ \_\_\_\_\_ (only applicable on mobile homes) on the unit I (we) have selected, which deposit is to be held as long as I (we) occupy the unit); and
- (3) pay all rent due in advance before occupancy of the property. All rent is due and payable in ADVANCE AT THE MANAGER'S OFFICE ON OR BEFORE THE FIRST DAY OF EACH MONTH.

**“It is the policy of StateStreet Group, LLC and this rental community to treat all current and prospective residents in a fair, professional manner, without regard to race, color, religion, sex, familial status, handicap or nation origin.”**

I (we) agree to pay \$ \_\_\_\_\_ as a non-refundable application fee.

\_\_\_\_\_  
Applicant's Signature (your signature must be **NOTARIZED** if application is not completed in our office)

\_\_\_\_\_  
Applicant's Signature (your signature must be **NOTARIZED** if application is not completed in our office)

**DO NOT WRITE BELOW IN THIS BOX**

Applicant: \_\_\_\_\_ Approved: \_\_\_\_\_ By: \_\_\_\_\_  
Unapproved: \_\_\_\_\_ Date: \_\_\_\_\_  
Reason: \_\_\_\_\_

**RESIDENCE AT HOMEWOOD PROPERTIES:**

**Have you ever lived at the following Mobile Home Communities?**

- \_\_\_\_\_ Country Meadows / 5000 Country Meadows Court / Brandon, MS 39042
- \_\_\_\_\_ Grove Acres / 2183 Old Brandon Road / Pearl, MS 39208
- \_\_\_\_\_ Homewood Manor / 5330 North State Street / Jackson, MS 39206
- \_\_\_\_\_ Harbor Pines / 701 Harbor Pines Drive / Ridgeland, MS 39157
- \_\_\_\_\_ Oak Lake / 202 Lake Ridge Circle / Pearl, MS 39208
- \_\_\_\_\_ Purple Creek (Ridgeland Mobile Estates) / 300 Highway 51 / Ridgeland, MS 39157
- \_\_\_\_\_ Stoney Creek / 201 Jefferson Street / Richland, MS 39218
- \_\_\_\_\_ Shady Springs / 8061 North McRaven Road / Jackson, MS 39209

**Have you ever lived at the following Apartment Complexes?**

- \_\_\_\_\_ Fondren Hill Apartments / 770 Lakeland Drive / Jackson, MS 39216
  - \_\_\_\_\_ Vieux Carré Apartments / 3975 I-55 North / Jackson, MS 39216
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**MOBILE HOME OWNER INFORMATION:**

**(Complete this portion if you are moving your own home into the park.)**

Make: \_\_\_\_\_ Year: \_\_\_\_\_ Size: \_\_\_\_\_ Serial #: \_\_\_\_\_

Selling Dealer: \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ Date purchased: \_\_\_\_\_

Mobile Home Financed with: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street City State Zip Code