

Parkwood Village

Apartments

2729-A Conifer Drive
 Raleigh, N.C. 27606
 PH: (919) 832-7611
 FAX (919) 834-9874

rental application

Thank you for your interest in our apartments. Please help us
 Process your application by providing all information below.

Type/Size of Apartment Wanted _____ Date Wanted _____

APPLICANT'S FULL NAME _____
 Date of Birth _____ Marital Status _____
 PRESENT ADDRESS _____
 Present Telephone _____ Present Landlord _____ Telephone _____
 How Long Have You Lived at Present Address? _____ Amount of Rent \$ _____
 Reason for Moving _____
 PREVIOUS ADDRESS _____
 How Long Did You Live at Previous Address? _____ Amount of Rent \$ _____
 EMPLOYED BY _____ How Long? _____
 Employer's Address _____ Telephone _____
 Your Position _____ Social Security Number _____

OTHER RESIDENTS	RELATIONSHIP	AGE

Employment of Co-Resident _____
 Do You Have Any Pets? _____
 Dow You Own Furniture? _____ Household Income \$ _____ Per _____
 Automobile _____ Year _____ Color _____ Tag # _____ State _____
 Automobile _____ Year _____ Color _____ Tag # _____ State _____
 Driver License # _____ State _____
 In Case of Personal Emergency, notify: _____ Relationship _____
 Address _____ Telephone _____

REFERENCES: Your Bank _____ Branch _____ Acct. No. _____
 Credit Reference _____
 Credit Reference _____
 Credit Reference _____

*I hereby make application for an apartment and certify
 that the above information is correct. I authorize you to
 contact any references that I have listed.*



Applicant's Signature _____
 Co-Signed _____
 Date _____