

Charlotte, NC 28223

www.uncchousing.com

## UniversityHousing

**Rental Application** 

Office: 516-697-3000 Fax: 516-697-3000

rick@uncchousing.com

This application is for the purpose of securing a rental property through University Housing. Please provide accurate and complete information as requested on this form.

SECTION I: PERSONAL INFORMATION						
Name:			Date of Birth:		Age:	
Street Address:			City:			
State: Zip	Code:	E-Mail:				
Phone hm:		cell:		wk:		
Drivers License #:	License #: Social Security #:					
University I will Atte			ILINIOR	SENIOR	MASTERS	PHD
currently rum a.	TRESITIVIAI				WIASTERS	
		SECTION II: EM				
Current Employer: _	t Employer: Employment Length:					
Supervisor:		Phor	ne #:	Mo	onthly Pay: \$	
Other source of inco	ome to be used fo	or rent: Parent	s Financ	cial Aid Stu	udent Loans	Grants
	:	SECTION III: REN	ITAL HISTOR	RY		
Presently renting fro	om:		How Lo	ng?	Rent (\$/mo):	
Lease began: Lease expires: _			Phone #:			
Previous rental reference:			How Long?			
Rent (\$/month):			Phone #:			
	EME	RGENCY CONTA	CT INFORMA	ATION		
Parents Names:						
Parents E-mail: Phone hm:		cell:		wk:		
Street Address:						
City:						

\*\*\*PLEASE BRING A PHOTOCOPY OF YOUR DRIVERS LICENSE/PASSPORT AND SS CARD TO SCHEDULED APPOINTMENT. A RENTAL CAN NOT BE SECURED WITHOUT YOUR PRE-FILLED APPLICATION, SECURITY DEPOSIT, AND I.D.'S.\*\*\*

The below signed does hereby give permission to th	e owner to make inquiries about previous rental
history, employment history, criminal history and/o	r credit reports made available through any
credit reporting service.	
Signature:	Date: