



HIGHLANDS TRAIL APARTMENTS
 101 MONTROSE COURT DOTHAN, AL 36305
 OFFICE (334)671-1815 FAX (334)673-9156
 hitrail@centurytel.net

RENTAL APPLICATION

Thank you for your interest in our apartment homes. Please complete all the requested information on the front and back of this application. Note that a **non-refundable** \$35.00 application fee per person or \$45.00 per joint couple is required to process this application. Each adult (18 or older) must fill out a separate application.

Current Date: _____ Apartment Size Desired: _____ Move In Date Desired: _____
 Lease Term Desired (12 or 6 months) _____ How did you hear about us: _____

PERSONAL INFORMATION

Applicant's Full Name : _____
 Current Address: _____ City: _____
 State: _____ Zip: _____ Present Landlord or Mortgage: _____
 Landlord/Mortgage Phone: _____ Fax: _____ Time At Present Address: _____
 Amount of Rent or Mortgage Paid: _____ Reason for Moving: _____
 Current Telephone: _____ Cell #: _____ Current Email Address: _____
 Date of Birth: _____ Social Security # _____ Driver's License# _____ State _____

Other Residents	Relationship	Social Security #	DL# / State	Birthday (mo/day/yr)

RENTAL/RESIDENCE HISTORY

Previous Address: _____ City: _____ State: _____ Zip: _____
 Time at Previous Address: _____ Amount of Rent or Mortgage Paid: _____
 Previous Landlord or Mortgage Holder: _____ Telephone: _____ Fax#: _____
 Reason for Moving: _____
Prior Address: _____ City: _____ State: _____ Zip: _____
 Time at Prior Address: _____ Amount of Rent or Mortgage Paid: _____
 Prior Landlord or Mortgage Holder: _____ Telephone/Fax#: _____
 Reason for Moving: _____

PETS

Do you own Pets? _____ How Many? _____ What Kind? _____
 Pet's Weight? _____ Breed: _____

Employment History

Employed By: _____ Position: _____

Employer's Address: _____ City: _____ State: _____ Zip: _____

Telephone: _____ Fax #: _____ Supervisor: _____ Length of Employment: _____

Previous Employment (if current employment is less than year): _____ Position: _____

Employer's Address: _____ City: _____ State: _____ Zip: _____

Telephone: _____ Fax #: _____ Supervisor: _____ Length of Employment : _____

Military

Rank: _____ Date Enlistment Ends: _____ Commanding Officer: _____ Phone _____

Your lease agreement provides a military clause upon receipt of military orders for permanent change of station or to deploy with a military unit for a period of not less than 90 days. Resident acknowledges that he/she is not aware of any reason that he/she would NOT be able to complete the FULL lease term. _____ (initials) Shorter lease terms are available if a Resident in the military has reason to believe that he/she cannot complete the full lease term. Rents may vary depending upon term of the lease.

Other Information

Number of Automobiles: _____ (Recreational Vehicles, oversized trucks and trailers are not accepted on the premises)

Make: _____ Year: _____ Color: _____ Tag No.: _____ State: _____

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Make: _____ Year: _____ Color: _____ Tag No.: _____ State: _____

APPLICANT QUESTIONNAIRE/AUTHORIZATION

Have you or anyone in your household ever been convicted of a felony or other crime? _____

If Yes, please explain: _____

Have you ever filed bankruptcy? _____ If Yes, please explain: _____

Household Income \$ _____ Per _____ (year/month/week)

In Case of Personal Emergency, Notify: _____ Relationship: _____

Address : _____ Telephone Number: _____

I, give Regency Multifamily Services and Highlands Trail Apartments, it's employees and/or agents "express prior consent" to contact me at any/all phone numbers; including cell phone numbers (by phone , text message or email), for purposes connected with my lease and account.

I hereby make application for a rental and certify that this information is correct. I authorize you to contact any reference that I have listed, conduct a criminal background check, and/or run a credit check. If application is approved and the apartment is taken off the market, the reservation fee will be forfeited should the applicant not lease the property. I understand that any information provided on this application that proves to be false will be grounds for termination of my lease agreement.

APPLICANT'S SIGNATURE: _____

DATE SIGNED: _____