

# UNIVERSITY PLACE AND SEVIER STREET APARTMENTS

P.O.BOX 8728

Asheville, NC 28814

www.university-apartments.net

Phone: (828) 231-4979 Email: ccandjapartments@yahoo.com

## RENTAL APPLICATION

Preferred Community:  University Place  Sevier Street  No Preference

<b>General Information</b>			
First	Middle	Last	Birth Date
Social Security #	Driver's License #	Sex listed on license/ID Female      Male	Preferred Phone #
University Email Address		Preferred Email Address	
Current Address		Permanent Address	
City, State & Zip		City, State & Zip	
How long at current address (From/To)?		How long at permanent address (From/To)?	

<b>Employment History</b>		
Employer	Job Title	Phone
Manager Name	Dates of Employment (From/To)	
Employer	Job Title	Phone
Manager Name	Dates of Employment (From/To)	

<b>Emergency Contacts</b>			
First	Last	First	Last
Cell Phone #	Alternate Phone #	Cell Phone #	Alternate Phone #
Relationship to Applicant		Relationship to Applicant	
Address		Address	
City, State & Zip		City, State & Zip	

**Co-Signer Information:** All residents are required to have a Co-Signer (Parent, Guardian, Grandparent) to guarantee their lease and will be responsible for ensuring that payments are made to the Landlord by the due dates assigned.

First	Middle	Last	Birth Date
Social Security #	Driver's License #	Cell Phone #	Alternate Phone #
Primary Email Address		Alternate Email Address	
Address		City, State & Zip	
Relationship to Student			

**Roommates:** We offer individual leases only. Residents will have a private bedroom and shared bathroom and common areas. We place with proposed roommates that have been approved by the Landlord, or we can place with an unknown individual(s) through our matching system. If you do not have proposed roommates, please complete the **Roommate Matching Form**. **Please list proposed roommates below.**

<b>1. Name</b>	Phone	Email	Age
Current University Place Tenant?	Unit #	Current Sevier Street Tenant?	Unit #
Yes ___ No ___		Yes ___ No ___	
<b>2. Name</b>	Phone	Email	Age
Current University Place Tenant?	Unit #	Current Sevier Street Tenant?	Unit #
Yes ___ No ___		Yes ___ No ___	
<b>3. Name</b>	Phone	Email	Age
Current University Place Tenant?	Unit #	Current Sevier Street Tenant?	Unit #
Yes ___ No ___		Yes ___ No ___	

### Agreement and Authorization

By submitting this application to CC&J Enterprises, Inc., either electronically with a typed/drawn signature or with a signed original paper copy, I am agreeing to the following:

I believe that the statements I have made are true and correct. I hereby authorize a credit and/or criminal check to be made, verification of information I provided, and communication with any and all names listed on this application. I understand that a discrepancy or lack of information may result in the rejection of this application. I understand that this is an application for a suite within an apartment and does not constitute a rental or lease agreement in whole or in part. If this application is approved, I will be provided an individual Lease by CC&J Enterprises, Inc. that will be signed by me and my Co-Signer within 14 days of receipt.

<b>Signature</b>	<b>Date</b>