



P.O. Box 620337  
Charlotte, NC 28262

# University Rentals

## Rental Application

Office: 704-510-1993  
Fax: 704-688-0818

www.unccrentals.com

info@unccrentals.com

*This application is for the purpose of securing a rental property through University Rentals. 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 #: \_\_\_\_\_ Social Security #: \_\_\_\_\_  
University I will Attend: \_\_\_\_\_  
Currently I am a: FRESHMAN SOPHOMORE JUNIOR SENIOR MASTERS PHD

### SECTION II: EMPLOYMENT

Current Employer: \_\_\_\_\_ Employment Length: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Phone #: \_\_\_\_\_ Monthly Pay: \$ \_\_\_\_\_  
Other source of income to be used for rent: Parents Financial Aid Student Loans Grants

### SECTION III: RENTAL HISTORY

Presently renting from: \_\_\_\_\_ How Long? \_\_\_\_\_ Rent (\$/mo): \_\_\_\_\_  
Lease began: \_\_\_\_\_ Lease expires: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Previous rental reference: \_\_\_\_\_ How Long? \_\_\_\_\_  
Rent (\$/month): \_\_\_\_\_ Phone #: \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION

Parents Names: \_\_\_\_\_  
Parents E-mail: \_\_\_\_\_  
Phone hm: \_\_\_\_\_ cell: \_\_\_\_\_ wk: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**\*\*\*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 the owner to make inquiries about previous rental history, employment history, criminal history and/or credit reports made available through any credit reporting service.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_