

GENERAL AUTHORIZATION

To whom it may concern:

I hereby authorize **SOUTHERN COASTAL MANAGEMENT INC.** to begin processing my rental application.

I hereby authorize **SOUTHERN COASTAL MANAGEMENT INC.** to verify my past and present employment earnings record, bank accounts and any other asset balances needed to process my rental application. I further authorize **SOUTHERN COASTAL MANAGEMENT INC.** to order a consumer credit report and verify other credit information including past and present mortgage and landlord references.

I hereby authorize **SOUTHERN COASTAL MANAGEMENT INC.** to release information concerning the disposition of my application to its employees, agents, successors and assigns involved in processing my application and if my application is rejected, **SOUTHERN COASTAL MANAGEMENT INC.** may release the reason for its actions to such persons.

The information obtained shall be used only in the processing of my application for a rental.

I authorize release of this information to the homeowner/landlord in order to make the final decision in this matter.

A copy of the release is also acceptable authorization.

Applicant

Date

Applicant

Date

SOUTHERN COASTAL MANAGEMENT INC.
RENTAL APPLICATION

MOVE IN DATE: _____

PROPERTY ADDRESS: _____

Name: _____ Phone# _____

Cell# _____ Email _____

Marital Status: Married _____ Single _____ Date of Birth: _____

SSN: _____ Driver's License# _____

Employer _____ Monthly Income _____

Supervisor _____ Phone # _____

Other source of monthly income:(child support, retirement, etc.) _____

Spouse Name: _____ Date of Birth: _____

SSN: _____ Driver's License#: _____

Employer _____ Monthly Income _____

Supervisor _____ Phone # _____

Other source of monthly income:(child support, retirement, etc.) _____

Number of adults _____ and children _____ that will reside in property

Does any family member smoke cigarettes, cigars or a pipe? _____

Own pets? _____ Type of pet (if applicable): _____

Current address: _____

How long? _____ Monthly rent _____ Deposit _____

Landlord's name _____ Phone # _____

Have you ever been evicted? _____ If so, Why _____

Have you ever broken a lease? _____ If so, Why? _____

Have you ever declared bankruptcy? _____ Discharge date? _____

Bank References _____ Type of accounts _____

Personal References:

Name _____ Phone#: _____

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Name _____ Phone#: _____

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I declare that the foregoing information is true and correct and agree that Southern Coastal Management Inc. may terminate any agreement entered into in reliance on any untrue information given above. I authorize verification of all credit and other information.

I understand and agree that once I have placed a Security Deposit with your firm to hold a rental property for me, that should I change my mind about renting that property, I will forfeit the entire deposit.

DATE _____

Witness

Applicant's Signature
