



201 Chatham Street, LaGrange, GA 30240  
Phone: 706-882-6416 | Fax: 706-882-0781 | HACOL@Phalagrangenet

## Dear Prospective Applicant,

Thank you for your interest in housing at Phoenix Crossing. This property consists of rental homes within the city of LaGrange, owned by West Georgia Star (WGS) a non-profit affiliate of The LaGrange Housing Authority. Upon acceptance of a unit, participants enter into a lease agreement with WGS. The Application Fee of \$50.00 is non-refundable.

Eligibility for the program will be determined by the following;

- No outstanding balance to any federal subsidized housing program (Public Housing, Section 8, Tax Credit, etc.)
- Criminal background check
- 5-year landlord history
- Rental payment history good
- No evictions on credit report with less than 2 late payments
- Credit check
- Must income qualify
- Must consent to home visit at current residence
- Utility in the Head of Household name only

**Accessibility:** WGS provides Reasonable Accommodations for persons with disabilities. If you would like information on Reasonable Accommodations, please contact the 504 Coordinator Eldra Faye Gilliam at (706) 882-6416 ext. 548. For the Hearing Impaired, call the TTY number – GA Relay at 1-800-255-0135 for free assistance.





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## RESIDENTIAL RENTAL APPLICATION

### **Landlord**

Landlord Name: West Georgia Star  
Address: 201b Chatham Street  
Phone: (706) 882-6416

### **Rental Property Information**

Rental Property Address: \_\_\_\_\_  
Application to rent Unit: \_\_\_\_\_  
The term of the lease will be a fixed term starting on \_\_\_\_\_ and ending on \_\_\_\_\_.  
Possession Date: \_\_\_\_\_  
Monthly Rent Payment: \$ \_\_\_\_\_  
Security Deposit: \_\_\_\_\_

### **Applicants' Personal Information**

Applicant's Name: \_\_\_\_\_  
Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Alternative Phone: (\_\_\_\_\_) \_\_\_\_\_  
Email Address (Optional): \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Applicant's Social Security Number: \_\_\_\_\_  
  
Second Applicant's Name: \_\_\_\_\_  
Second Applicant's Date of Birth: \_\_\_\_\_  
Second Applicant's Social Security Number: \_\_\_\_\_  
  
Third Applicant's Name: \_\_\_\_\_  
Third Applicant's Date of Birth: \_\_\_\_\_  
Third Applicant's Social Security Number: \_\_\_\_\_



Name(s) of Dependent(s):

Date(s) of Birth:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Do you have a pet?      Yes / No      If more than one, how many? \_\_\_\_\_

Please describe type(s) of pet(s):

\_\_\_\_\_

\_\_\_\_\_

**Residential History**

Present Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

ZIP Code: \_\_\_\_\_ How long at this address? \_\_\_\_\_

Landlord / Lessor: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Previous Address 1: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

ZIP Code: \_\_\_\_\_ How long at this address? \_\_\_\_\_

Landlord / Lessor: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Previous Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

ZIP Code: \_\_\_\_\_ How long at this address? \_\_\_\_\_

Landlord / Lessor: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

**Details of Employment**

Employer: \_\_\_\_\_

Position: \_\_\_\_\_ Date Hired: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Salary: \_\_\_\_\_

(If employed less than one year with present employer, please provide previous employer.)

Employer: \_\_\_\_\_

Position: \_\_\_\_\_ Date Hired: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Salary: \_\_\_\_\_

**Other Sources of Income**

Do you receive income from any of the following sources? Yes / No

Student Loans \_\_\_\_\_ Pension Benefits \_\_\_\_\_ Social Assistance \_\_\_\_\_ Other \_\_\_\_\_

Please provide contact persons who could verify the amount of additional income you receive:

\_\_\_\_\_  
\_\_\_\_\_

**Vehicle Information**

Make / Model: \_\_\_\_\_ Year: \_\_\_\_\_

License Plate Number: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

Make / Model: \_\_\_\_\_ Year: \_\_\_\_\_

License Plate Number: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

Parking stall required? Yes / No Additional stall required? Yes / No (Subject to availability)

**Banking Information**

Banking Institution: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

(If you bank with more than one institution, please list second bank below)

Banking Institution: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

**References**

Name: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Name: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

**Emergency Contact**

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

**Criminal & Credit Background Check Authorization**

Is there anything negative that we may find in our criminal or credit background check that you want to comment on?

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I declare that the information I have provided is accurate. I authorize the individual or organization to whom this application is submitted to: (a) contact my references and all other persons that I have named in this application; and (b) perform a credit and/or criminal check to assess my suitability as a tenant/lessee.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_