



The Chateau
A P A R T M E N T S

201 Highway 54 Bypass West
Carrboro, North Carolina 27510

APPLICATION FOR RESIDENCY

Date: _____

Desired Lease Term: _____ Desired Move In Date: _____ Rental Rate: _____

OCCUPANT(S) Please Print

Co-Applicant: _____ Date of Birth: _____
Last First M/I

Social Security No.: _____ - _____ - _____ Work Phone: _____ Home Phone: _____

Co-Applicant: _____ Date of Birth: _____
Last First M/I

Social Security No.: _____ - _____ - _____ Work Phone: _____ Home Phone: _____

If you prefer to be contacted via e-mail, please provide address: _____

RESIDENCE HISTORY

Present Address: _____ How Long? _____
Street Address City State Zip

Present Landlord: _____ Phone: _____

Previous Address: _____ How Long? _____
Street Address City State Zip

INCOME

Present Employer: _____ Phone: _____

Address: _____ Contact: _____

Position/Dept: _____ Length of Employment: _____ Monthly Income: _____

Co-Applicants Employer: _____ Phone: _____

Address: _____ Contact: _____

Position/Dept: _____ Length of Employment: _____ Monthly Income: _____

(If not employed, please list other sources of income, financial support, student loans, etc.) _____

CREDIT REFERENCES	Account No.	Balance
BANK REFERENCES	Checking/Savings	Balance

VEHICLE INFORMATION

Make	Model	Year	Owner	State	License No.