

The Stables Student Application 208 Zoey Way

Tifton, Ga 31793 Office: 229-396-4606

E-mail: stables@tiftonapartments.com

Name	Social Security #
Present Address	Date of Birth
City, State, Postal Code, Country	
Email	Applicant Phone #
School Attending	
Vehicle Color Make	Model Tag #
Noarost Polativo Namo	Phone #



Do you or do any of your occupants have charges pending against you or against them for any criminal offense(s)?	Applicant Yes Occupants Yes	
Have you or have any of your occupants ever been convicted of, or pleaded guilty or no contest to, any criminal offense(s) or had any criminal offense(s) disposed of other than by acquittal or a finding of "not guilty"?	Applicant Yes Occupants Yes	
Any litigation, such as: evictions, suits, judgments, bankruptcies, foreclosures, etc.?	Applicant Yes Occupants Yes	
If "Yes" to any of the above questions, give details and dates:		
PLEASE READ CAREFULLY AND SIGN BELOW Correct InformationApplicant represents that all of the above statements are true authorizes Property Staff to contact any references listed above and to obtain const background information, about Applicant and any occupants in the apartment in or references, credit and criminal records. Applicant further authorizes Property Staff ensure that Applicant continues to satisfy the terms of the tenancy, for the collection relating to Applicant's tenancy, or for any other permissible purpose. Applicant her responsibility all persons and corporations requesting or supplying such information incomplete or misleading information herein may constitute grounds for rejection occupancy of all occupants under a lease and/or forfeiture of deposits and fees, and the laws of this State. This Application is preliminary only and does not obligate Ow or to deliver possession of the dwelling unit to Applicant.	umer reports, which may in rder to verify the above inf to obtain subsequent cons on and recovery of any fina eby releases from all liabili n. Applicant acknowledges of this application, termina d may constitute a crimina	nclude criminal ormation, umer reports to ncial obligations ty or t that false, tion of right of I offense under
I have read and agree to the provisions as stated.		
Applicant Signature		
Date		
OFFICE USE ONLY		
Apartment Number		
Apartment Size/Description		
Anticipated Move-in Date		
Lease Start Date		
Lease End Date		

Monthly Apartment Rent