

## APARTMENT RENTAL APPLICATION

*Each co-resident and each occupant over 18 must submit a separate application. Spouses may submit a joint application.*

For Management Use Only	
Date Needed: _____	Apt. No. _____
Rent: \$ _____	Apt. Type _____
Total Received: \$ _____	

### I. APPLICANT INFORMATION

Applicant's Name	<input type="checkbox"/> Married <input type="checkbox"/> Married - Separated <input type="checkbox"/> Married - Legally Separated	<input type="checkbox"/> Single – Never Married <input type="checkbox"/> Single - Divorced <input type="checkbox"/> Single - Widowed		
Current Address	Street	Apt #	Telephone #	
City	State	Zip	Drivers License # & State	Email Address
Present Landlord/Complex	Length of Time at Current Address		Current Monthly Rent \$	
Address			Phone #	
Previous Address	City	State	Zip	
Previous Landlord/Complex	Address		Phone #	

### II. HOUSEHOLD COMPOSITION

1. (All persons who will occupy apartment, starting with the Head of Household)

Name	Sex M/F	Age	Date of Birth	Social Security #	Relationship to Head of Household
1					Self
2					
3					
4					
5					
6					
7					

- 2 Do you have full custody of all children in household?  YES  NO
- 3a. Do you expect any additions to the household with the next 12 months?  YES  NO
- 3b. Do you expect anyone to move out within the next 12 months?  YES  NO
- 3c. Are there any absent household members who, under normal circumstances, would live with you?  YES  NO
- 4 Do you have any pets?  YES  NO
- 4a. If yes, how many? \_\_\_\_\_ Describe type/breed/weight/age \_\_\_\_\_

**III. INCOME INFORMATION**

List income of all adults in your household (except for income earned from employment by persons under the age of 18 unless emancipated.) **Must answer all questions with “NO or “NONE”.**

Annual Income -Indicate whether anyone in your household receives income from any of the following sources	Applicant 1	Co-Applicant 2	Other Household Members 3	Total 4
Salary/Wages				
Overtime Pay				
Commissions Tips and Bonuses				
Court Ordered Child Support or Alimony				
Income from Business				
Social Security, Pensions, Retirement Funds, etc.				
Support from Parents or Relatives				
Unemployment Benefits				
Workers' Compensation				
AFDC/TANF				
Interest and/or Dividends				
Other: (Explain)				

**IV. EMPLOYMENT.**

(List all full-time and part-time employers of all persons in your household. If employed less than 12 months with current employer, also list previous employer)

Name of Household Member	Name of Employer (Company Name)	Contact Person	Address of Employer	Phone # of Employer
<i>Previous Employer</i>				

**V. ASSETS.**

1. List all assets of all adults and persons in your household, including those under the age of 18. **Must answer all questions with “NO or “NONE”**

Listing of All Assets	Cash Value	Annual Interest, Dividends or Rent from Assets	Name of Financial Institution	Account Number
Checking Account(s)				
Savings Account(s)				
CD, Money Market Account(s)				
Stocks, Bonds or Mutual Funds				
Real Estate (Home, Property, Mobile Home, Time Share)				
IRA/ Keogh Account/401K				
Retirement/Pension Fund				
Trust Fund				
Mortgage Note Held				
Whole Life Insurance				
Cash Value				
Other: (explain)				
<b>Total Cash Value</b>				

2. Do you certify that you have not disposed of any assets for less than fair market value in the last two years preceding the date of this application? YES [ ] NO [ ]

**VI. STUDENTS.**

1. Are any members of your household 18 years old, or older, and a student attending School or College on a full-time basis for 5 or more months this year?  YES (if yes, identify below)  NO

Household Member Name

School/College Name & Address

Household Member Name

School/College Name & Address

1a. If yes, are any of the students listed above eligible to file a joint Federal Tax Return?  YES  NO

If yes, Name \_\_\_\_\_

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

1b. If yes, are any of the students listed above enrolled in a government sponsored job training program?

YES  NO If yes, Name \_\_\_\_\_ Program: \_\_\_\_\_

**VII.** Do you require a Handicap Assessable Unit? Yes  No

**VIII.** Have any members of the household listed on this Application been arrested for a felony a drug-related, or a sex related crime that was resolved by conviction, probation, deferred adjudication, court-ordered community supervision, or pretrial diversion? Yes  No

**IX.** Are you willing to disclose race, ethnicity, and handicap status, as defined by HUD, for each member of your household? Yes  No

\*There is no penalty for persons who do not wish to disclose this information.

**X.** Applicant acknowledges they are aware that this Apartment community is non-smoking communities. No smoking is allowed inside the apartment or within 25 feet of the buildings or common areas.

Yes  No  Applicant Initials \_\_\_\_\_

**XI. PERSONAL INFORMATION / EMERGENCY CONTACT**

1. \_\_\_\_\_  
Automobile Model/Year Tag # Automobile Model/Year Tag #

2. List any personal references you may wish us to notify In case of Emergency Please Notify

\_\_\_\_\_  
Name

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone #

\_\_\_\_\_  
Phone #

**THIS SECTION IS VERY IMPORTANT: YOU MUST READ, UNDERSTAND, AND SIGN THIS STATEMENT.**

I certify that all of the above information about me, and my household, is true, complete and accurate. I also understand that ALL CHANGES to the INCOME of ANY member of the household as well as ANY CHANGES in household members must be reported to the Management in writing IMMEDIATELY.

Applicant has submitted a non-refundable APPLICATION FEE of \$\_\_\_\_\_. This fee will be utilized by Management to cover the costs for the credit and background check, and verification of application information. All fees will be forfeited by Applicant if they choose to cancel this application.

Applicant hereby deposits \$\_\_\_\_\_ with Management as a RESERVATION FEE in connection with this rental application. If the application is accepted, the Reservation Fee will be applied toward payment of; check one of the following signifying Applicant's choice:

- ( ) The Security Deposit of \$\_\_\_\_\_ or
- ( ) A Sure Bond in the amount of \$\_\_\_\_\_ when Applicant takes possession of the apartment.

If for any reason Management decides to decline the application, Management will refund the Reservation Fee to the Applicant in full. Applicant may cancel this application by written notice within 72 hours and receive a full refund of this Reservation Fee within 30 days of the cancellation. If the Applicant cancels the application after 72 hours, or refuses to occupy the premises on the agreed upon date, Applicant understands this Reservation Fee will be forfeited due to the expenses and lost rent incurred.

The undersigned warrants and represents the information on this Application to be true and correct. All persons and firms named may freely give any requested information concerning me and I hereby waive all right of action for any consequence resulting from such information. The undersigned authorizes Management to release all information contained in this Application on behalf and for the benefit of the undersigned. I understand that Management may obtain a background report including information as to my credit and criminal history, in connection with my Application and that my Application may be rejected based on information contained in the reports.

\_\_\_\_\_  
Signature of Head of Household **and** Date

\_\_\_\_\_  
Signature of Co-Applicant **and** Date

**THE LEASE AGREEMENT WILL NOT BECOME EFFECTIVE UNTIL THIS APPLICATION IS APPROVED BY MANAGEMENT.**

The Fair Housing Act of 1988 makes discrimination based on race, color, religion, sex, familial status, handicap or national origin illegal in connection with rental housing. The Federal agency which administers compliance with this law concerning this company: Department of Housing and Urban Development, Washington, D.C. 20410. The Federal Equal Credit Opportunity act prohibits creditors from discriminating against credit applicants on the basis of sex or marital status. The Federal agency which administers compliance with this law concerning this company: Equal Credit Opportunity, Federal Trade Commission, Washington, D.C. 20508. The Standard Qualifying Criteria includes: a monthly household income that is four times the rental rate; a criminal record free of felony convictions; a "favorable" credit rating from the credit agency; a rental history with no late rent payments, evictions or registered complaints; valid social security number or proof of legal residency for all adults; and no more than two occupants per bedroom. Failure to meet any of these may result in a denial of application. Additional standards may be applicable.

**This Section for Management Use Only**

Application Approval	
This Application: Information Verified By _____ Date _____	
<input type="checkbox"/> APPROVED <input type="checkbox"/> NOT APPROVED                      Manager _____ Date _____	
How Notified _____ Applicant Notified By _____ Date _____	
If Application denied, was Applicant given the name and address of the person or reporting agency that verified the application? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<p style="text-align: center;"><b>Reason for Application Denial</b></p> <input type="checkbox"/> Unfavorable Credit Report  <input type="checkbox"/> Unfavorable Criminal Report  <input type="checkbox"/> Unfavorable Report from Previous Landlord  <input type="checkbox"/> Household Over Income  <input type="checkbox"/> Insufficient Income  <input type="checkbox"/> Incorrect Information Submitted on Application  <input type="checkbox"/> Full-Time Student Household	<p style="text-align: center;"><b>Money Delivered with Application</b></p> Application Fee \$ _____ Reservation Fee \$ _____ Pet Fee: _____ \$ _____ Other Fee: _____ \$ _____ Other Deposit: _____ \$ _____  First Month Rent                      \$ _____  Total Received                                      \$ _____
<input type="checkbox"/> Other:	