



|             |          |              |          |             |          |
|-------------|----------|--------------|----------|-------------|----------|
| Consultant  | _____    | Lease Term   | _____    | Source      | _____    |
| Apartment # | _____    | Move-in Date | _____    | Rent Amount | \$ _____ |
| Deposit     | \$ _____ | Pet Deposit  | \$ _____ | App Fee     | \$ 50.00 |
| Admin Fee   | \$ _____ | Pet Fee      | \$ _____ |             |          |

**PLEASE PRINT CLEARLY**

| PERSONAL INFORMATION                              |  | Date of Birth | Driver's License # | Social Security # | Education |
|---|--|---------------|--------------------|-------------------|-----------|
| Applicant (Complete Legal Name)                   |  |               |                    |                   |           |
| Spouse (Complete Legal Name)                      |  |               |                    |                   |           |
| Children (Name, Date of Birth, Social Security #) |  |               |                    |                   |           |

|                                  |  |
|----------------------------------|--|
| Pets (Name, Type, Weight, Color) | Management Approval (Office to Complete) |
|----------------------------------|--|

|                 |      |       |          |
|-----------------|------|-------|----------|
| Present Address | City | State | Zip Code |
|-----------------|------|-------|----------|

|              |           |           |                               |                  |
|--------------|-----------|-----------|-------------------------------|------------------|
| Home Phone # | How Long? | Rent Paid | Present Landlord or Caretaker | Landlord Phone # |
|--------------|-----------|-----------|-------------------------------|------------------|

|                  |           |           |                               |                  |
|------------------|-----------|-----------|-------------------------------|------------------|
| Previous Address | How Long? | Rent Paid | Present Landlord or Caretaker | Landlord Phone # |
|------------------|-----------|-----------|-------------------------------|------------------|

Does anyone in the household have a misdemeanor or felony conviction? If so, please explain

**SOURCE OF INCOME**

|                             |        |                   |                      |
|-----------------------------|--------|-------------------|----------------------|
| Applicant- Current Position | Salary | Supervisor's Name | Supervisor's Phone # |
|-----------------------------|--------|-------------------|----------------------|

|                        |                    |                      |
|------------------------|--------------------|----------------------|
| Employer for Applicant | Employer's Address | Period of Employment |
|------------------------|--------------------|----------------------|

|                              |        |                   |                      |
|------------------------------|--------|-------------------|----------------------|
| Applicant- Previous Position | Salary | Supervisor's Name | Supervisor's Phone # |
|------------------------------|--------|-------------------|----------------------|

|                   |                    |                      |
|-------------------|--------------------|----------------------|
| Previous Employer | Employer's Address | Period of Employment |
|-------------------|--------------------|----------------------|

|                          |        |                   |                      |
|--------------------------|--------|-------------------|----------------------|
| Spouse- Current Position | Salary | Supervisor's Name | Supervisor's Phone # |
|--------------------------|--------|-------------------|----------------------|

|                   |                    |                      |
|-------------------|--------------------|----------------------|
| Spouse's Employer | Employer's Address | Period of Employment |
|-------------------|--------------------|----------------------|

**ADDITIONAL SOURCES OF INCOME (I.E. PART TIME JOB, ASSISTANCE, DISABILITY)**

|        |                 |         |
|--------|-----------------|---------|
| Source | Amount Received | Phone # |
|--------|-----------------|---------|

**BANK ACCOUNT (INDICATE BRANCH AND SERVICES USED)**

|           |              |           |         |                                  |
|-----------|--------------|-----------|---------|----------------------------------|
| Bank Name | Bank Address | Account # | Phone # | Bank Service (Please Circle One) |
|           |              |           |         | Savings / Checking / Loan        |

**EMERGENCY CONTACTS**

|            |         |         |
|------------|---------|---------|
| Contact #1 | Address | Phone # |
|------------|---------|---------|

|            |         |         |
|------------|---------|---------|
| Contact #2 | Address | Phone # |
|------------|---------|---------|

**CREDIT REFERENCES (BE SPECIFIC)**

|              |         |           |
|--------------|---------|-----------|
| Account Name | Address | Account # |
|--------------|---------|-----------|

|              |         |           |
|--------------|---------|-----------|
| Account Name | Address | Account # |
|--------------|---------|-----------|

**VEHICLES**

| Make | Year | License Plate # - State | Model & Color | Paid to Whom (Even if Paid in Full) | Amount |
|------|------|-------------------------|---------------|-------------------------------------|--------|
|------|------|-------------------------|---------------|-------------------------------------|--------|

| Make | Year | License Plate # - State | Model & Color | Paid to Whom (Even if Paid in Full) | Amount |
|------|------|-------------------------|---------------|-------------------------------------|--------|
|------|------|-------------------------|---------------|-------------------------------------|--------|

I (we) hereby make application for occupancy of the described apartment unit on the terms specified.

I (we) understand that the Application Fee is non-refundable. The Administrative Fee and Security Deposit(s) accompanying this application will be refunded immediately if application is not approved or if said application is withdrawn within 3 days of the below date. After said 3 day period the Administrative Fee and Security Deposit(s) are non-refundable.

**Applicant Initials** \_\_\_\_\_

If this application is approved, I (we) agree to enter into an Agreement of Lease for the apartment unit, terms of rental as outlined herewith. If I (we) refuse to enter into an Agreement Lease when offered by the management, or if occupancy is not taken within 5 days after the occupancy date indicated, the deposit made within shall be retained by the management as liquidated damages.

At the time of the Agreement of Lease is executed, the Application Deposit made herewith shall be applied to and become a part of the Performance and Damage Deposit. Miscellaneous Fees and the first month's rent will become due at that time.

I (we) affirm the above information to be true and correct. All persons and/or firms named above may freely give any requested information concerning me (us), and I (we) hereby waive all right of action for any consequence resulting from such information. Any false information will constitute grounds for rejection of the application.

In connection with my (our) application for residency, I (we) understand that investigative background inquiries are to be made, including consumer credit, criminal convictions, and other reports. Further, I (we) understand that information from various Federal, State, and other agencies will be requested which maintain records concerning my past activities relating to credit, criminal and civil activities, and will be maintained in a confidential manner. This inquiry includes information as to your character, general reputation, personal characteristics and mode of living.

You have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation. Fair Credit Reporting Act 606(a)(1)

Signed (Applicant) \_\_\_\_\_ Date \_\_\_\_\_

Signed (Spouse) \_\_\_\_\_ Date \_\_\_\_\_