Quality Independent Living (QIL)

(Higher Living)

A Church of Christ Development

5068 Lansing Drive

Winston-Salem, NC 27105

Phone: (336)767-6021 Fax: (336) 767-6025

**Lease Application**

This application must be completed in its entirety. Questions that do not apply should be denoted by “NA”. Incomplete application will not be processed.

Applicant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Social Security# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Maiden Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age: \_\_\_\_\_\_\_\_\_ Driver’s License#/State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Co-Applicant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Social Security# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Maiden Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Driver’s License#/State: \_\_\_\_\_\_\_\_\_\_\_\_\_

Additional Occupants: All individuals Living in the unit must be listed below.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| NAME | AGE | DATE OF BIRTH | SS# | RELATIONSHIP |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| 4. |  |  |  |  |

Present Address: Phone: ( )

Street\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_

How Long at Present Address? \_\_\_\_\_\_\_ Own or Rent? \_\_\_\_Monthly Rent/Mortgage \_\_\_\_\_

Landlord’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: ( )\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for Moving: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Previous Address:

Street \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County \_\_\_\_\_\_\_\_\_\_\_\_\_State \_\_\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_

How Long at Previous Address? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Landlord’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: ( )\_\_\_\_\_\_\_\_\_\_\_\_\_

Please bring a copy of landlord reference letter on letterhead. This must be done before application will be processed.

Financial References:

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

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

Personal References: (Do not include family members or relatives. If employed, one reference must be your employer)

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you or any member of your lease terminated or ever been evicted from your home?

Yes\_\_\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_\_

If yes, explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you or any member of your household been arrested for or convicted of a crime? Yes\_\_\_\_ No \_\_\_\_

If yes, explain; include status/disposition of judicial case(s)

**UNIT REQUEST:** 1 Bedroom \_\_\_\_\_\_\_\_ 2 Bedroom \_\_\_\_\_\_\_ Handicap\_\_\_\_\_\_\_

List any special needs or requirements: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

I am interested in the following: (For an extra charge of $15.00 per month)

\_\_\_\_ Refrigerator \_\_\_\_ Dishwasher

**AUTOMOBLE:** Please provide the following for each vehicle to be parked at the property.

Make: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Model: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ License Plate# \_\_\_\_\_\_\_\_\_

Make: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Model: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ License Plate# \_\_\_\_\_\_\_\_\_\_

**IN CASE OF EMERGENCY NOTIFY:**

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

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

 ( ) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell

**IF HOSPITALIZATION IS NEEDED, TRANSPORT TO:**

Wake Forest University Baptist Medical Center\_\_\_\_\_\_\_\_\_\_\_\_ Forsyth Medical Center\_\_\_\_\_\_ Other \_\_\_\_

**PROCESSING FEE/SECURITY DEPOSIT:**

A non-refundable $60.00 processing fee must accompany this application. If the application is accepted, the processing fee will be applied toward $498.00 (1 Bedroom) or $598.00 (2 Bedroom) security deposit. The first month’s rent, $498.00 (1 Bedroom) or $598.00 (2 Bedroom) will be due move-in. PLEASE MAKE CHECKS PAYABLE TO: HIGHER LIVING, INC.

THE APPLICATION MUST BE SIGNED BY ALL ADULT MEMBERS OF THE HOUSEHOLD. APPLICANT(S) CERTIFY THAT ALL INFORMATION PROVIDED IS TRUE AND CORRECT. BY SIGNING THE APPLICATION, APPLICANT(S) UNDERSTAND AND AGREE THAT THE MANAGEMENT OF HIGHER LIVING INC. IS AUTHORIZED TO VERIFY ALL INFORMATION. ANY INFORMATION FOUND TO BE FALSE OR WILLFULLY OMITTED MAY RESULT IN REJECTION OF THE APPLICATION AND/OR EVICTION.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Applicant) Date: \_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Co-Applicant) Date: \_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Co-Applicant) Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Co-Applicant) Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COMMUNITY CODE**

1. Whenever the word “resident” is used in these rules and regulation, it shall be taken to apply and include the resident, his servants, business, and social guest and is to include such gender and number as the circumstance requires.
2. The management reserves the right to require that the resident shall submit medical documentation that he/she is capable of occupying the premises independently and without infringing on the quiet enjoyment of the other residents. Management my require the resident to submit said documentation at any time that the management has reason to believe that resident’s physical, mental or emotional status has changed or deteriorated. Failure to submit documentation within fourteen ( 14 ) days of the request shall be deemed a breach of the lease agreement.
3. Management will not be responsible to the resident for non-observance of the rules by others. It is the responsibility of the residents to caution their guest and neighbors to comply with the rules and regulations governing occupancy.
4. Management shall in all cases retain the right to control and prevent access to the building or any part thereof or to the grounds of the complex of all persons whose presence in the judgment of the management or its employees shall be deemed prejudicial to the safety, character, reputation or interests of the complex or its occupants.
5. Door keys are provided by the QIL Management for entrance to the complex and to an individual’s apartment. If key(s) are lost or misplaced, a minimal fee of $5.00 will be charged for a replacement. Additionally, there will be a $25.00 charge per key not returned at termination of the lease. This charge covers replacement of apartment and mailbox locks to insure proper security for the apartments.
6. Pets are not allowed unless the pet is a Seeing Eye or Hearing Aid dog.
7. QIL is a smoke free building. Fire drill will be held at regular intervals. During these times residents and visitors will obey orders or request of the staff.
8. All residents are required in QIL programs involving the safety and health or its residents. This includes but is not limited to a card check program, fire drills, emergency evacuation exercises and safety lectures.
9. NO ALCOHOLIC beverages are allowed in public areas.
10. NO sexual misconduct is allowed on the premises.
11. Any behavior deemed lewd, indecent or immoral will subject the resident to disciplinary action.
12. All residents shall observe the rights of the other residents by being especially conscious of noise after 10:00pm. This includes turning down televisions, stereos, radios, etc., as well as not running loud appliances such as vacuum cleaners.
13. QIL will not be responsible for clothing, money, jewelry, and personal items such as televisions, clocks or other valuables.
14. Property left by or for residents with the custodial or other employees or management with be received such as agents of the resident. Management with not be responsible for property left by or for residents that is lost or damaged.
15. Visitors are only permitted entrance to building by a resident. Residents can be contacted through the intercommunication system. Residents are responsible for escorting visitors in and out of the building. Unidentified persons must be reported to the management.
16. Overnight visitors need to be cleared through the management.
17. No visitors shall be allowed in common areas unless accompanied by resident or otherwise instructed by management.
18. Management reserves the right to designate the time, routing and method of delivery or removal of any freight package, furniture, food or other articles to, form or within the building.
19. No moving van, truck or trailer will be driven onto the sidewalk or grass for any reason. Should the resident or moving van acting as the resident’s agent violates this regulation, the resident shall be responsible for any damages incurred.
20. No automobiles or other vehicles shall be parked in front of the building nor sufficiently near any said entrance to interfere with the convenient use of the building or discharging of passenger or goods. Residents and guests shall park in approved parking spaces only observing all “Handicapped Only,” “No Parking” and “Fire Line” signs.
21. The yard, sidewalk, halls, passage and stairways shall not be obstructed by any of the residents nor used by them for any other purpose than those of entering and exiting their respective apartment nor under no conditions shall any resident or employees of any resident go upon the roof nor loiter in the laundry room.
22. Private entry doors to individual apartments shall not be caused nor allowed to stand open or be unlatched except during actual use for entering and exiting. During air conditioning season, residents shall not cause nor allow windows to be open so as to increase cost of air conditioning. Windows shall be closed during inclement weather to prevent rain or other elements from getting inside the building.
23. No picture books, nails or other device for suspending pictures, mirrors, et c., shall be driven in any part of the building nor shall any porting of the same be marked, defaced or in anywise altered except with the consent of the management: No airy nails, tacks or other devices for securing rugs, carpets or other floor covering upon the floor shall be driven into or fastened to the floors without the written consent of the management.
24. Floors, doors, skylights and windows reflecting or submitting light into passageways or elsewhere in the building shall not be covered or obstructed by the residents.
25. Nothing shall be thrown by the residents or their guests or servants out of the windows or doors, or down the passages, halls, stairways or porches nor shall they allow articles to be placed upon window ledges or the passages, halls, stairways or porches nor shall they allow articles to be placed upon window ledges or sills or dropped from windows nor throw or sweep dirt or other materials or substances nor beat or shake rugs from any window or door nor place and /or any other article or property in the public areas, hallways or entries.
26. Residents shall not use any electrical appliance that will interfere in any way with the radio or television reception of other residents nor in any event build or use any outside aerials for any purpose.
27. Electric blankets and heating pads are permitted. Hot plates and space heaters are not permitted. Apartments will be inspected periodically as a safety measure.
28. All garbage or refuse shall be bagged by the resident and placed in the trash dumpster daily.
29. All holiday and other decorations must be made of flameproof materials. No Live Trees will be allowed in building.
30. The community room with the kitchen is available to all residents on an “as needed “basis. There is no charge for reserving the room however, there will be a $25.00 (twenty-five) fee assessed if the room is left dirt. Any damages to the property will be deducted from the resident’s deposit.
31. All fees assessed and not paid will be deducted from the resident’s deposit.
32. The management reserves the right to make other and further rules and regulations as in its judgment may from the time to time be needful for the safety and protection of the premises and its care and cleanliness and for the preservation of good order therein, which when so made and notice thereof give to the resident shall have the same force and effect as if originally made a part of this agreement.
33. All tenants are allowed to have overnight guest to stay up to 14 days(not consecutive months) after management approval.