

# Hands Free Property Management, LLC

## Rental Application

Please print when completing this application.



Hands Free Property Management, LLC is committed to the letter and spirit of the Fair Housing Act, which, among other things, prohibits discrimination against persons with disabilities. In accordance with our statutory responsibilities and management policies, we will make reasonable accommodations upon written request, in our rules, policies, practices, or services, when such accommodations may be **necessary** to afford persons with disabilities an equal opportunity to use and enjoy their housing communities.

### APPLICANT

Full Name: \_\_\_\_\_ Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
(First) (Middle) (Last)

Present Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

Email: \_\_\_\_\_ Expected Move in Date: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ Rent per month: \$ \_\_\_\_\_ Years There: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Drivers License Number: \_\_\_\_\_

Previous Street Address: \_\_\_\_\_ Years There: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ Rent per month: \$ \_\_\_\_\_ Landlord & Telephone: \_\_\_\_\_

Present Employer: \_\_\_\_\_ Years There: \_\_\_\_\_ Telephone: \_\_\_\_\_

Position or Title: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Years There: \_\_\_\_\_

Previous Employer's Address: \_\_\_\_\_

Present Net Income/Month: \$ \_\_\_\_\_ Number of Hours worked: \_\_\_\_\_ / Week \_\_\_\_\_ / Month

Number of occupants that will be occupying the unit: \_\_\_\_\_

### Co- APPLICANT

Full Name: \_\_\_\_\_ Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
(First) (Middle) (Last)

Present Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

Email: \_\_\_\_\_ Expected Move in Date: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_ Rent per month: \$ \_\_\_\_\_ Years There: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Drivers License Number: \_\_\_\_\_

Present Employer: \_\_\_\_\_ Years There: \_\_\_\_\_ Telephone: \_\_\_\_\_

Position or Title: \_\_\_\_\_ Name of Supervisor: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

Present Net Income/Month: \$ \_\_\_\_\_ Number of Hours worked: \_\_\_\_\_ / Week \_\_\_\_\_ / Month

**NOTE:** Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for paying this obligation.

Other income: \$ \_\_\_\_\_ per \_\_\_\_\_. Sources of other income: \_\_\_\_\_

Is any income listed in this section likely to be reduced in the next two years?  Yes  No If Yes, please explain:

\_\_\_\_\_

**SECTION C - PERSONAL AND/OR CREDIT REFERENCES - INCLUDE PAST AND PREVIOUS LANDLORD**

NAME	ADDRESS	PHONE NUMBER	YRS KNOWN/ RELATIONSHIP
Present Landlord 1.			
Previous Landlord 2.			
3.			
4.			
5.			

**Applicant:**

**CO-Applicant:**

- |   |   |   |
|---|---|---|
| 1. <input type="checkbox"/> Yes <input type="checkbox"/> No | 1. <input type="checkbox"/> Yes <input type="checkbox"/> No | 1. Have you ever filed bankruptcy?  |
| 2. <input type="checkbox"/> Yes <input type="checkbox"/> No | 2. <input type="checkbox"/> Yes <input type="checkbox"/> No | 2. Have you ever been convicted of or plead guilty or no contest to a felony?   |
| 3. <input type="checkbox"/> Yes <input type="checkbox"/> No | 3. <input type="checkbox"/> Yes <input type="checkbox"/> No | 3. In the last ten years, have you been arrested, convicted of or plead guilty or no contest to a charge of possessing, dealing or manufacturing illegal drugs? |
| 4. <input type="checkbox"/> Yes <input type="checkbox"/> No | 4. <input type="checkbox"/> Yes <input type="checkbox"/> No | 4. Have you ever been evicted, whether or not a court proceeding was necessary to evict you?  |
| 5. <input type="checkbox"/> Yes <input type="checkbox"/> No | 5. <input type="checkbox"/> Yes <input type="checkbox"/> No | 5. Are you currently registered, or have you ever been required to register as a sex offender?  |
| 6. <input type="checkbox"/> Yes <input type="checkbox"/> No | 6. <input type="checkbox"/> Yes <input type="checkbox"/> No | 6. Do you have or plan on allowing pets in the apartment unit?  |

Name of nearest relative not living with you: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Relationship: \_\_\_\_\_ Address: \_\_\_\_\_

Automobile Make, Model & Year: \_\_\_\_\_ License #: \_\_\_\_\_ State: \_\_\_\_\_  
 Are you the co-maker and/or guarantor of any loan or contract?  Yes  No If Yes, to whom \_\_\_\_\_  
 Are there any unsatisfied judgments or liens against you?  Yes  No If Yes, to whom \_\_\_\_\_  
 Other obligations - (i.e. liability to pay alimony, child support, separate maintenance) Use separate sheet if necessary:  
 \_\_\_\_\_

**ACKNOWLEDGEMENT AND AGREEMENT**

Applicant agrees to submit a non-refundable application fee of \$ \_\_\_\_\_.

Applicant agrees to submit a security deposit of \$ \_\_\_\_\_. Applicant acknowledges and agrees that the security deposit will only be refunded to applicant if Applicant does not meet the rental selection criteria of Hands Free Property Management, LLC.

Applicant hereby authorizes HANDS FREE PROPERTY MANAGEMENT, LLC to obtain any information it deems necessary for the purpose of evaluating this application, including without limitation credit history, criminal history, civil information, rental history, employment history, income verification, vehicle records, licensing records, information from public agencies, and/or any other information relevant to this application. Applicant understands that subsequent consumer reports may be obtained and utilized under this authorization in connection with an update, renewal, extension or collection with respect or in connection with the rental or lease of a residence for which application was made. Applicant hereby releases HANDS FREE PROPERTY MANAGEMENT, LLC and any procurer or furnisher of information from any liability in the use, procurement, or furnishing of such information, and understands that the application information contained herein may be provided to various local, state and/or federal government agencies, including without limitation, various law enforcement agencies.

Applicant represents and warrants that all of the above information and statements are correct and complete, and agrees that the information may be used by HANDS FREE PROPERTY MANAGEMENT, LLC in determining whether to lease to Applicant. Applicant agrees that Applicant has no right to occupy an apartment unit until and unless this application is approved, a lease is signed and Applicant has made any necessary initial payments. Applicant understands that any misrepresentation on this application may be cause for lease termination and/or non-acceptance of this application.

**All persons will be treated fairly and equally without regard to race, creed, ancestry, color, religion, gender, familial status, disability, national origin, age, marital status, sexual orientation, or public assistance status in compliance with the Fair Housing Act and all other applicable state law. Print name of Applicant**  
 Signature \_\_\_\_\_

**Applicant:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**CO-Applicant:** \_\_\_\_\_

**Date:** \_\_\_\_\_