

Rental Application

Office Use
Date Received: _____
Time Received: _____

Property: _____

Unit Number: _____

- * All Adults 18 years of age or older must complete their own application
- * The use of Liquid Paper (white-out) or erasable ink will void this form
- * To make a correction, please draw a single line through the incorrect information, initial and correct the information

Household Composition:

Applicant: _____	Home Phone: _____
Address: _____	Cell Phone: _____
_____	Work Phone: _____
_____	Email: _____

Household Information (Required)							
****List all household members that live with you****							
Name MI, Last)	(First, Relationship to Head of Household	M/F	SS#	Birth Date	Marital Status	Full-Time Student (Circle One)	
	HEAD					Y	N
						Y	N
						Y	N
						Y	N
						Y	N
						Y	N
						Y	N

*S=Single/M=Married/W=Widowed/Sep=Seperated/D=Divorced

Divers License Information:

List below all occupants over the age of 18. Attach a copy of all License or ID's to the back of application

Full Name	Drivers License #	State Issued

Housing Reference: List all residences and applicable landlord references in the past three years

Present Address _____ City _____ State _____ Zip _____

From _____ To _____ Reason for Leaving _____

Did you own this residence? ____ Yes ____ No If no, did you rent this residence ____ Yes ____ No

Landlord _____ Address _____ City _____

State _____ Zip _____ Landlord Phone _____ Rent Per Month _____



PENALTIES FOR MISUSE: Title 18, Section 1001 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentation to any department or agency of the U.S. Government



Previous Address _____ City _____ State _____ Zip _____
 From _____ To _____ Reason for Leaving _____
 Did you own this residence? ____ Yes ____ No If no, did you rent this residence ____ Yes ____ No
 Landlord _____ Address _____ City _____
 State _____ Zip _____ Landlord Phone _____ Rent Per Month _____

General Information:

1. Do you own a pet? YES or NO If yes, what kind? _____ Weight: _____
2. Have you or anyone else on this application filed bankruptcy OR in the process of filing bankruptcy? YES or NO
 If yes, please explain: _____
3. Have you or anyone else named on this application been convicted OR in the process of being convicted of a felony?
 YES or NO If yes, please explain: _____
4. Have you or anyone else named on this application ever been evicted OR in the process of being evicted for any reason?
 YES or NO If yes, please explain: _____
5. Are you or anyone else named on this application subject to a lifetime state sex offender registry program in any state?
 YES or NO If yes, please explain: _____
6. Have you or anyone else named on this application been convicted OR in the process of being convicted of dealing or
 manufacturing illegal drugs?
 YES or NO If yes, please explain: _____
7. Are you or anyone in your household subject to any federal, state or local lifetime sex offender registry?
 YES or NO If yes, please explain: _____
8. Have you or anyone else named on this application been convicted OR in the process of being convicted of property
 damage?
 YES or NO If yes, please explain: _____
9. Do you expect any additions to the Household in the next 12 months? YES or NO
 If yes, please explain: _____
10. Is there anyone living with you now who won't be living with you at this property? (Includes Relatives)
 YES or NO If yes, please explain: _____
11. Do all the children in the household live with you 50% or more of the time? YES or NO
 If yes, please explain: _____
12. Are there any absent household members who under normal conditions would live with you? YES or NO
 (For Example, a household member away in the Military)
 If yes, please explain: _____
13. Does your household have or anticipate having any pets other than those that are used as service animals?
 YES or NO If yes, please explain: _____
14. Will you or any Adult household member require a live-in care attendant to live independently?
 YES or NO If yes, please explain: _____



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Emergency Contact: (Other than a person listed on this application) Please list someone in the immediate area if possible

Name	_____	Relationship	_____
Home Phone	_____	Work Phone	_____
Cell Phone	_____		

Income Information:

1 Employment Information

(To include: Tips, Overtime, Bonuses, Commissions & Cash Payments)

Household Member	Type of Income	Income Earned	Frequency
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Place of Employment: _____

How Long _____

2 Have you changed employment within the last 6 months? YES or NO

If yes, please list household member and explain:

Household Member	Explanation
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_____	_____
_____	_____
_____	_____

3 Do you or anyone else named on this application receive income from benefits or pensions? YES or NO

(To include: Social Security, SSI or any other payments from the Social Security Administration, Regular payments from a Veteran's Benefit, Pension, Retirement Benefit or Annulities)

Household Member	Type of Income	Income Earned	Frequency
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4 Do you or anyone else named on this application receive income from Child Support/Alimony/Maintenance?

YES or NO

Household Member	Type of Income	Income Received	Frequency
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



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5 Do you or anyone else named on this application receive income from any other source not listed above?
 (To include: Unemployment Benefits, Workers Compensation, Disability, Insurance Payments, Military Income, Regular gifts from anyone outside of the household and/or Payments from rental property or other real estate transactions)

YES or NO

Household Member	Type of Income	Income Earned	Frequency
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Student Status Information:

1 Are you or any other household member (INCLUDING MINORS) currently, expected to be or have been in the last 12 months a full-time or part-time student?

YES or NO

Household Member	Name of School	Date Last Attended
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Signature Clause:

I understand that the owner is relying on this information to prove my eligibility. I certify that all information and answers to the above questions are true and complete to the best of my knowledge. I consent to release the necessary information to determine my eligibility. I understand that providing false information or making false statements may be grounds for denial of my application

I authorize my consent to have owner/management verify the information contained in this application for the purpose of proving my eligibility for occupancy. I will provide all necessary information including source names, addresses, phone numbers and account numbers where applicable and any other information required for expediting this process. I understand that my occupancy is contingent upon meeting owner/management's resident selection

ALL ADULTS (over 18 years of age) HOUSEHOLD MEMBERS MUST SIGN BELOW

_____ Signature	_____ Printed Name	_____ Date
_____ Signature	_____ Printed Name	_____ Date
_____ Signature	_____ Printed Name	_____ Date
_____ Signature	_____ Printed Name	_____ Date
_____ Signature	_____ Printed Name	_____ Date



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RESIDENT QUALIFYING INFORMATION

The credit policy is to thoroughly investigate everyone making application to our community. All financially responsible parties living in our homes must qualify and sign a lease. Each applicant must qualify on his/her own ability and a picture ID will be necessary to verify applicant and addresses with the application. Owner reserves the right to require lease co-signers, increased deposits and/or prepaid rent.

I/WE ASSESS THE FOLLOWING:

- 1 **RESIDENCE HISTORY** - I/We will verify your present and past residences, the length of residency, the record of your rental payments, the condition of the home upon your vacating, the dollar amount of damages there may have been to such home, noise complaints, written notices given and rental amount. If an eviction was filed, your application is automatically declined.

- 2 **EMPLOYMENT/INCOME VERIFICATION** - I/We will review your employment, name of employer, length of employment, any anticipated layoffs and gross salary. If unemployed, you must show proof of unearned income. If self-employed, a tax return and/or other documentation must be made available.

- 3 **Credit Report** - I/We will review your credit report provided by the credit bureau. All credit must be rated acceptable per my guidelines. Should you have outstanding balances on utilities and/or apartment communities, a receipt showing proof that all balances have been paid in full is necessary to be considered for residency.

- 4 **Criminal Background** - This will be conducted through a recent criminal record report and a search of the national and state sex offender registry. Positive background checks only to be accepted.

- 5 **Non-U.S. Citizen** - You must qualify based on Number 1-4 above in addition to providing proof of current VISA and current PASSPORT. If Social Security number has been applied for, you must show documentation. I/We reserve the right, based upon our findings, to accept or reject your application.

ALL LESSEES OVER THE AGE OF 18 MUST SIGN:

LESSEE	DATE	LESSEE	DATE
LESSEE	DATE	AGENT FOR LESSOR	DATE

I/WE UNDERSTAND THE FOLLOWING:

THE CREDIT REPORT AND CRIMINAL BACKGROUND REPORT - will be screened through "The Crossing". The cost will be \$25.00 per person (over the age of 18) to be paid in CASH during the Application Process. This fee is not to be considered part of the Security Deposit and is NON REFUNDABLE.

LESSEE	DATE	LESSEE	DATE
LESSEE	DATE	AGENT FOR LESSOR	DATE



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