

**Rental Application** 



Personal Information

First Name		Middle Name			Last Nar	me			
Social Security No.			Photo ID #			Type of	ID	State of	r Gov't of ID
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Data of Bimth	,	E-mail Address					Dhar-		
Date of Birth		E-mail Address					Phone I	INU.	
					ry (current)				
Present	Owi		ented			rent's	Stude		Other
address is:	HO	use H	House	Араі	rtment H	Home	Hous	ынк	
				_					
Present Landlord / C	Commi	unity / Mortgage	Co		Address of Landlord	d / Commı	unity / Mor	rtgage Co	 -
		i							
Present Address			County			City		State	Zip Code
How Long?	Mont	thly Payment	Move-out Dat	e	Reason for Leavi	ng			
		,				0			
Housing History (previous)									
Previous address was:	Own Hou		nted ouse			rent's Home	Stude Hous		Other
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Previous Landlord /	Comm	unity / Mortgage	e Co. Address of Landlord		d / Commı	unity / Mor	rtgage Co		
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Previous Address			County			City		State	Zip Code
			, <u>,</u>			<u>, ,</u>			
How Long?	Mont	thly Payment	Move-out Dat	<u>е</u>	Reason for Leaving				
now Long?   Monthly Payment		, i synicht				···D			
			En	nployı		,			
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Employer (Company Name)		5)	How Long?	Wor	rk Phone No.		Gross Moi	nthly Inco	ome
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Job Title			Addross		City		Ctat-	Zin Cod	
		Address			City		State	Zip Code	
						<b>_</b>			
Other Verifiable Inco	ome S		Frequency of Receipt			Gross Monthly Income from Other(s) Dates of Birth			
		Names				Dates	s of Birth		

In the space above, please list all additional occupants and their dates of birth.







# Rental Application Criminal Background Information



Have you or any of your occupants ever been convicted of or plead guilty or no contest to any criminal offense(s), or had any criminal offense(s) disposed of	Myself:	Yes	No
other than by acquittal or a finding of "not guilty?"	Occupant:	Yes	No
Do you or any of your occupants have any charge(s) pending against you for any	Myself:	Yes	No
criminal offense(s)?	Occupant:	Yes	No
Do you or any of your occupants have any litigation against you such as evictions,	Myself:	Yes	No
suits, judgments, bankruptcies, foreclosures, etc?	Occupant:	Yes	No

If you answered "Yes" to any of the above, please use the space above to provide dates and details.

## Emergency Contact Information

(this person will be granted access to the unit in the case of the leaseholder's death)

Contact Name	E-mail Address	Mobile Phone No.					
Relationship	Address	City		State	Zip Code		
Animal							
(requires further documentation)							

(requires further documentation)						
Туре	Breed	Weight	Name	License / Tag No.		

#### How did you hear about our Community?

Internet (website name)	Resident (name)	Publication (title of publication)
Rental Agency (name)	Community Sign (please specify)	Other (please specify)

### Please read carefully and sign below

You represent that all of the above statements are true and complete. You authorize us to contact any references listed above and to obtain consumer reports, which may include credit, rental payment history, and criminal background information about you and any occupants in the premises in order to verify the above information. You further authorize us to obtain subsequent consumer reports to ensure that you continue to satisfy the terms of your tenancy, for the collection and recovery of any financial obligations relating to your tenancy, or for any other permissible purpose. You understand that we may report all positive and negative rental payment history to consumer reporting agencies who track this information for landlords, mortgage companies, and other creditors. You and all occupants hereby release from all liability or responsibility all persons and corporations requesting or supplying such information. You acknowledge that false, incomplete, or misleading information herein may constitute grounds for rejection of this application, termination of right of occupancy of all residents and occupants under a lease, forfeiture of deposits and fees, and may constitute a criminal offense under the laws of this State. By providing an e-mail address, you consent to receive property-wide e-mail messages from us. This application is preliminary only and does not obligate us to execute a lease or to deliver possession of the premises to you. All necessary application information (including but not limited to identity and income verification) must be received by Management within seven (7) days of this application's submission. If any information is pending after seven (7) days, it will be considered a voluntary cancellation of this application on the part of the applicant.

## **Terms of the Optional Hold Deposit**

a) The Applicant understands that by paying the non-refundable Optional Hold Deposit, upon approval of their application they are granted the right to choose their own unit from the available selection, which will be taken off the market and held for them until their anticipated move-in date. The amount paid toward the non-refundable Optional Hold Deposit will be applied toward the applicant's first month's rent upon move-in. The Optional Hold Deposit will be forfeited by the Applicant upon the Applicant's voluntary cancellation of the application. The Optional Hold Deposit will be refunded only in the event of denial of an application by Management after timely receipt of all necessary application materials.

b) Should the applicant elect not to pay the Optional Hold Deposit, then no particular unit will be held. In this case, the applicant will pay a refundable deposit that will make them part of the Future Residents Club (FRC). Members of the FRC will be assigned a unit by Management on the day of the member's anticipated move-in date. In this case, Management makes no guarantee that a unit of the applicant's desired size will be available on the date of their anticipated move-in. The refundable deposit will be applied toward the Applicant's first month's rent upon move-in. The refundable deposit is fully refundable prior to move-in upon the Applicant's request to withdraw the application. Applicant has elected: Option a) Option b)

Applicant			
Signature:			Date:

