

Brightwood Crossing

Resident Criteria Information

We inquire the following when processing your application for approval.

Resident History: We do verify your present and past residences for the length of time at residency. The request of rental payment history, condition of the apartment upon vacating, dollar amount of damages, noise complaints, proper written notice given and monthly rental amount will be asked. We also verify rental history going back two to three years. If you do not have rental history, you will be asked to pay an additional deposit of one month's rent up front. In addition, **EVERYONE applying** for residency at Brightwood Crossing will have a criminal background check done which is part of the application process.

Employment Verification: We verify your employment history, the company you are employed with, length of employment (minimum of 6 months) and we also verify your gross income. Verification can include the following:

1. Pay stubs
2. Bank Statements
3. Tax Returns

The applicant must earn in one month the equivalent of 3 times the amount of the market rent of the apartment for which you are applying. If there is more than one applicant for an apartment, the combined monthly income for all applicants must equal 3 times the monthly rental rate.

Credit History: All credit must be rated satisfactory. Our credit reports will show your prior residences when applying for credit. We will compare the addresses on the credit report to the addresses you provided on your application. If you do not have any credit history, you will be asked to pay an additional deposit. Any applicant owing money to or evicted from another apartment community within the last 5 years will be denied.

Applicants who do not have established credit, sufficient amount of income, employment history, rental references, or adverse trade account history reported by the credit bureau may qualify by paying an additional (refundable) security deposit.

Roommates: Each roommate must meet **ALL** eligibility requirements for the apartment.

Pets: Only dogs and cats are permitted within the following guidelines.

1. Pets must weigh 35 lbs. and under
2. Resident must sign the pet agreement form
3. No more than two pets per apartment
- Animals used as disability assistance are not considered as animals under this policy.

FALSE INFORMATION: Any falsification of information on the application will automatically disqualify the applicant and all deposits and application money will be forfeited.

Brightwood Crossing Apartments

6798 Leaf Crest Drive

Whitsett, NC 27377

Phone: (336) 449-9990 Fax (336) 449-9939

brightwoodcrossing@yahoo.com

Apartment Needed

Size: _____ Date: _____

Upper _____ Lower _____

Security Deposit Required: \$ _____ Initials: _____ Deposit with Application: \$ _____ Date Placed: _____

Balance of Security Deposit Due: \$ _____ Date Placed: _____ Term of Lease: _____

UNIT: # _____ MONTHLY RATE: \$ _____ TOTAL DEPOSIT: \$ _____ MOVE-IN DATE: _____

SPECIALS / DISCOUNTS: _____

PLEASE TELL US ABOUT YOURSELF: Notice: All Roommates & Guarantors must complete a separate Rental Application

Full Name: _____ Phone: () _____ Cell: () _____

Date of Birth: _____ Social Security #: _____ Driver's License # and State _____

Spouse: _____ Phone: () _____ Cell: () _____

Date of Birth: _____ Social Security #: _____ Driver's License # and State _____

Name of Co-Applicant or Guarantor: _____ DOB: _____

Other Occupants: _____ DOB: _____

Number of Dependents (excluding Co-Applicant) _____

Child's Name: _____ DOB: _____

Child's Name: _____ DOB: _____

Child's Name: _____ DOB: _____

Pets: Name/Breed/Weight: _____

Non Refundable Pet Fee: \$ _____ Pet Deposit: \$ _____ Non Refundable Pet Fee: \$ _____ Pet Deposit: \$ _____

PLEASE GIVE YOUR RESIDENCE HISTORY FOR THE PAST 5 YEARS (Beginning With Most Current):

CURRENT ADDRESS: _____ Zip Code: _____

Month & Year Moved In: _____ Reason for Leaving: _____

Owner or Agent: _____ Phone: () _____ Fax: () _____

PREVIOUS ADDRESS (If within 5 years): _____ Zip Code: _____

Month & Year Moved In: _____ Reason for Leaving: _____

Owner or Agent: _____ Phone: () _____ Fax: () _____

PREVIOUS ADDRESS (If within 5 years) _____ Zip Code: _____

Month & Year Moved In: _____ Reason for Leaving: _____

Owner or Agent: _____ Phone: () _____ Fax: () _____

PLEASE GIVE YOUR EMPLOYMENT HISTORY:

YOUR STATUS: Employed Full-Time Employed Part-Time Student Retired Not Employed

EMPLOYER: Previous Current _____

Date(s) Employed: _____ Employed as: _____

Supervisor: _____ Supervisor's Phone: () _____ Fax: () _____

Address: _____

Salary: \$ _____ per _____ Gross monthly income: \$ _____ Hours worked per week: _____

If employed by above less than 6 months, give name, address, Supervisor and Phone# of Previous Employer or School: _____

If there are other sources of income you would like us to consider, please list income, source and person (Banker, Employer, etc.) who we could contact for confirmation. You do NOT have to reveal alimony, child support or spouse's annual income unless you want us to consider it in this application.

Amount \$ _____ Source _____

SPOUSE EMPLOYMENT HISTORY:

YOUR STATUS: Employed Full-Time Employed Part-Time Student Retired Not Employed

EMPLOYER: Previous Current _____

Date(s) Employed: _____ Employed as: _____

Supervisor: _____ Supervisor's Phone: () _____ Fax: () _____

Address: _____

Salary: \$ _____ per _____ Gross monthly income: \$ _____ Hours worked per week: _____

If employed by above less than 6 months, give name, address, Supervisor and Phone# of Previous Employer or School: _____

If there are other sources of income you would like us to consider, please list income, source and person (Banker, Employer, etc.) who we could contact for confirmation. You do NOT have to reveal alimony, child support or spouse's annual income unless you want us to consider it in this application.

Amount \$ _____ Source _____

CONTINUED OVER

PLEASE GIVE YOUR GENERAL INFORMATION: Including Company Vehicles that will be parked on the property.

Vehicle: Make/Model/Color: _____ Year: _____ Tag No: _____ State: _____
Vehicle: Make/Model/Color: _____ Year: _____ Tag No: _____ State: _____
Vehicle: Make/Model/Color: _____ Year: _____ Tag No: _____ State: _____

CONTACT INFORMATION

*Emergency Contact: _____ Phone: _____ Work: _____
Address: _____ Relationship: _____
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Address: _____ Relationship: _____
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Address: _____ Relationship: _____

List Three References: (Name, Relation, Address, Phone Numbers)

HAVE YOU EVER:	Filed for bankruptcy?	No	Yes
	Been sued for damages or Rental Property?	No	Yes
	Been evicted from tenancy?	No	Yes
	Broke a Rental Agreement or Lease?	No	Yes
	Willfully or intentionally refused to pay rent when due?	No	Yes
	Been arrested or involved in criminal activities?	No	Yes

If you answered yes to any of these questions, please explain: _____

How did you find out about our property? _____

I hereby apply to lease the above described premises for the term and upon the conditions above set forth and agree that the rental is to be payable the first (1st) day of each month in advance. As an inducement to the owner of the property and to the agent to accept this application, I warrant that all statements above set forth are true; however, should any statement made above be a misrepresentation or not a true statement of facts, my application fee and \$_____ of my security deposit will be retained to offset the agent's cost, time, and effort in processing my application.

I hereby deposit \$_____ as a security deposit to be refunded to me if this application is not accepted within five (5) business banking days. Upon approval of this application, this deposit shall be retained as part of the security deposit. When so approved and accepted I agree to execute a lease for _____ months before possession is given and to pay the balance, if any, of the security deposit within five (5) business banking days after being notified of acceptance, or the deposit I have posted with this application will be forfeited as liquidated damages in payment for the agent's time and effort in processing my inquiry and application, including making necessary investigation of my credit, character, and reputation. If this application is not approved and accepted by the owner or agent, the deposit will be refunded, the applicant hereby waiving any claim for damages by reason of non-acceptance, which the owner or his agent may reject without stating any reason for so doing.

Applicant(s) represents that all of the above statements information on the application for rental are true and complete, and hereby authorizes an investigative consumer report and verification of any and all information relating to residential history (rental or mortgage) employment history, criminal history records, court records, and credit records. Applicant acknowledges that false or omitted information herein may constitute grounds for rejection of this application, termination of occupancy, and/or forfeiture of fees or deposits and may constitute a criminal offense under the laws of this State. I/We hereby release Resident Data and any of the above from any liability and responsibility arising from their doing so. Facsimiles of this authorization may be used to facilitate multiple inquiries. In the event you receive a facsimile of this authorization, it should be treated as an original and the requested information should be released to facilitate my/our application for residency.

The above information, to the best of my knowledge, is true and correct.

Signature of Applicant _____ Date _____

Signature of Spouse _____ Date _____

Representing Agent for BSC Holdings: Brightwood Crossing _____ Date _____

OCCUPANTS 18 YEARS OR OLDER

In connection with the lessee(s) application as an occupant, 18 years of age or older, for residence at Brightwood Crossing Apartments, I hereby authorize any consumer agency, current and previous employer, current and any former landlord, law enforcement agency, any check authorization agency, and state employment security agency to release all information any of them may have about me to Resident Data, Inc. I hereby release all of these parties from any liability in connection with release of such information. I also authorize the use of Resident Data, Inc of data contained in my application residence for demographically or other types of studies or reports. A facsimile or other copy of this authorization shall be sufficient for release by aforesaid parties. This authorization is for this transaction only and continues in effect for one (1) year unless limited by state law, in which case the authorization form continues in effect for the maximum period, not to exceed one (1) year, allowed by law.

Signature of Occupant _____ Driver's License Number / State _____ Date of Birth _____ Social Security Number _____ Date _____