



APPLICATION FOR RESIDENCY

Application fee \$ _____ THIS IS A NON-REFUNDABLE PAYMENT FOR A CREDIT CHECK AND PROCESSING CHARGE FOR THIS APPLICATION. SUCH SUM IS NOT A RENTAL PAYMENT OR SECURITY DEPOSIT. THIS AMOUNT WILL BE RETAINED BY COMMUNITY OWNER TO COVER THE COST OF PROCESSING APPLICATION AS FURNISHED BY THE APPLICANT.

PERSONAL INFORMATION

PLEASE PRINT

Applicant's full name _____ Date of birth _____

First Middle Last

Sex M F Marital status _____ Phone _____ Cell phone _____ Email Address _____

Social security no. _____ Driver's license no. _____ State _____

Co-applicant's full name _____ Date of birth _____

First Middle Last

Sex M F Marital status _____ Phone _____ Cell phone _____ Email Address _____

Social security no. _____ Driver's license no. _____ State _____

List name, date of birth and relationship of other persons occupying premises:

Name _____ Date of Birth _____ Social Security No. _____ Relationship _____

Name _____ Date of Birth _____ Social Security No. _____ Relationship _____

Name _____ Date of Birth _____ Social Security No. _____ Relationship _____

Name _____ Date of Birth _____ Social Security No. _____ Relationship _____

Pet? Y N Type _____ Name(s) _____ Size _____ No. _____ Non-refundable pet fee \$ _____

In case of emergency, notify (not living with you): Name _____

Address _____ Phone _____

City _____ State _____ Relationship _____

RESIDENCE HISTORY

Present address _____

Street Apt. # City State Zip

Community name, landlord or mortgage holder _____ Phone _____

Monthly payment \$ _____ Length of residence _____ / _____ Lease expires _____

Yrs. Mos.

Reason for Moving _____

Have you ever had an eviction filed against you? Y N Have you ever broken a rental agreement? Y N

If Y to either question, where? _____

EMPLOYMENT INFORMATION

Applicant's present employer _____ Address _____

Street Since

City State Zip Code Position _____

Work phone _____ Contact _____ Gross monthly income \$ _____

Other Verifiable Income _____

Co-applicant's present employer _____ Address _____

Street Since

City State Zip Code Position _____

Work phone _____ Contact _____ Gross monthly income \$ _____

Other Verifiable Income _____



OTHER INFORMATION

Auto make/model _____ Year _____ Color _____ License Plate _____ State _____
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APPLICANT'S CONSENT

Have you (or any co-resident) ever been convicted of a crime? Y N

If yes, explain _____

AUTHORIZATION:

I hereby authorize the Sheriff's Department or other independent services or local law enforcement agencies to furnish the Community Owner with any information such agencies may have concerning me. I do hereby release the Community Owner, Sheriff's Department and other such agencies from all liability for any damage whatsoever incurred in furnishing, obtaining and using such information.

I further authorize the Community Owner to obtain a credit history and report concerning me, and hereby release the Community Owner and the credit-reporting agency from all liability for any damage whatsoever incurred in furnishing, obtaining and using such information.

Applicant and Co-Applicant each represent that all the above statements are true and hereby authorize verification of above information, references and credit records. Applicant and Co-Applicant each acknowledge that false information herein may constitute grounds for rejection of this application, terminating the right of occupancy, and forfeiture of deposits and may constitute a criminal offense under the laws of this State.

Keys will be furnished only after the contemplated lease and other rental documents have been accepted by all parties and only after applicable rentals and the security deposit and the non-refundable fees have been paid. The initial rent payment will be due and payable upon the signing of the lease and other rental documents and will cover the period from the first day of the term through the remainder of that month. Thereafter, all rental payments will be due and payable in advance on the first day of each month.

Signature: _____

Applicant

Signature: _____

Co-Applicant

Date: _____

Date: _____

DEPOSIT

I hereby deposit the following with Community Owner as a good faith deposit in connection with this application for residency:

	Required Amount	Amount Paid	Date Paid
Refundable Premises Security Deposit	\$ _____	\$ _____	_____
Non-refundable Application Fee	\$ _____	\$ _____	_____
Non-refundable Pet Fee	\$ _____	\$ _____	_____
Non-refundable Administrative Fee	\$ _____	\$ _____	_____

If my application is accepted and a lease and all other rental documents have been signed by all parties, I understand the security deposit (Premises) will become my refundable security deposit upon meeting the terms of the Lease and Community Rules and Regulations. If for any reason, Community Owner decides to decline my application, then Community Owner will refund the Premises Security Deposit and the non-refundable fees, excluding application fee, to me in full. If Community Owner accepts the application but is unable to allow me to occupy the premises on the date agreed because of a delay caused by construction or holding over of a prior resident, then I agree that my sole remedy shall be the return and refund of the deposits and non-refundable fees, including the application fee. I hereby waive my right to damages against Community Owner or management due to failure of Community Owner or management to provide the premises for occupancy. If I fail to occupy the premises on the agreed upon date, except for delay caused by construction or holding over of a prior resident, I understand that Community Owner shall assess as liquidated damages the security deposit and fees (except non-refundable pet fee and non-refundable administrative fee) paid to Community Owner through the date of proposed occupancy, including non-refundable application fee, and Premises Security Deposit, and such amounts shall be considered liquidated damages and not a penalty to reimburse Community Owner for re-rental costs and expenses incurred due to any cancellation in view of the fact that the parties agree that such costs are difficult to ascertain. It is understood that I shall have 72 hours from the date of submitting this application for residency in which to cancel this rental application and receive a return of the deposits and non-refundable



fees, excluding the application fee. Any cancellation after 72 hours after submission of this application by the Applicant or Co-Applicant shall incur the liquidated damages noted above unless Community Owner should decline my application. I further understand that all original forms must be returned to Community Owner and verifications must be completed prior to the move-in date.

TITLE VIII of the CIVIL RIGHTS ACT OF 1996 makes discrimination based on race, color, religion, sex, familia status or national origin illegal in connection with the rental of most housing. The Federal agency that administers compliance with this law is the U. S. Department of Housing and Urban Development.

EQUAL CREDIT OPPORTUNITY ACT: The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against applicants on the basis of sex or marital status. The Federal agency, which administers compliance with this law, is the Equal Credit Opportunity, Federal Trade Commission, Washington, D. C. 20580.

THE UNDERSIGNED APPLICANT HEREBY DECLARES THAT THE REPRESENTATION OF FACT CONTAINED IN THE FOREGOING APPLICATION IS CONSIDERED PART OF MY LEASE AND ARE TRUE AND CORRECT. I AGREE THAT IF ANY INFORMATION HEREIN CONTAINED IS FALSE, THE LEASE MADE ON THE STRENGTH OF THIS APPLICATION MAY, AT THE OPTION OF THE LANDLORD, BE TERMINATED AT ANY TIME. APPLICANT AUTHORIZES LESSOR TO VERIFY THE ABOVE STATEMENTS INCLUDING, BUT NOT LIMITED TO, BY THE USE OF CREDIT INFORMATION AGENCIES. IN THE CASE WHERE A CREDIT REFERENCE IS NOT AVAILABLE, A COMPLETE AND THOROUGH COMPANY FINANCIAL STATEMENT WILL BE PROVIDED UPON REQUEST.

Signature: _____
Applicant

Signature: _____
Co-Applicant

Date: _____

Date: _____

-----FOR OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE-----

Approval: _____ Confirmation Date: _____ Time: _____ Initials: _____ Move-in Date _____

Disapproval: _____ Confirmation Date: _____ Time: _____ Initials: _____

If this Application was disapproved, was the Applicant given the name and address of the person or the reporting agency that verified the application? Yes _____ No _____ Date _____ Manager's Signature _____

Was a copy of the decline letter placed in the file with the application? Yes _____ No _____ Date _____

Manager's Signature: _____

