



(Each occupant must submit a separate application unless the Applicant and Co-Applicant share joint credit)

APPLICATION FOR RESIDENCY

DATE APT. TYPE
APT # MOVE-IN DATE
MONTHLY RENT LEASE DATES
SOURCE MOVE-IN RENT AMOUNT
COMMENTS LC INITIALS

APPLICANT'S NAME DATE OF BIRTH SS#
CO-APPLICANT'S NAME DATE OF BIRTH SS#
APPLICANT'S STATE AND DRIVER'S LICENSE # CO-APPLICANT'S STATE AND DRIVER'S LICENSE #

OTHER OCCUPANTS

Name Date of Birth
Name Date of Birth
Name Date of Birth

12 months of resident history including dormitory residency is required.

RESIDENT HISTORY

PRESENT ADDRESS Street Apt. # City State Zip
DATES: FROM-TO Present Landlord/Resident Mgr. Apt. Community/Mortgage Co. & Loan # Phone #
MONTHLY PAYMENT REASON FOR MOVING HOME #
PREVIOUS ADDRESS Street Apt. # City State Zip
PREVIOUS APT. NAME OR LANDLORD ADDRESS
MONTHLY PAYMENT PHONE # HOW LONG?

HAS APPLICANT OR CO-APPLICANT EVER BEEN EVICTED FROM ANY LEASED PREMISES? IF YES, EXPLAIN

HAVE YOU EVER BEEN CONVICTED OF A FELONY? APPLICANT YES NO CO-APPLICANT YES NO

12 months of employment history including student status is required.

EMPLOYMENT/STUDENT HISTORY

PRESENT EMPLOYER POSITION
BUSINESS ADDRESS Street City State Zip BUSINESS PHONE #
SUPERVISOR EMPLOYED SINCE
PREVIOUS EMPLOYER POSITION
BUSINESS ADDRESS Street City State Zip BUSINESS PHONE #
SUPERVISOR EMPLOYED SINCE
CO-APPLICANT'S EMPLOYER POSITION
BUSINESS ADDRESS Street City State Zip BUSINESS PHONE #
SUPERVISOR EMPLOYED SINCE

MISCELLANEOUS

DO YOU OWN ANY PETS? IF SO, HOW MANY? BREED WEIGHT COLOR
PERSONAL EMERGENCY CONTACT:
NAME RELATIONSHIP
ADDRESS HOME PHONE # BUS. PHONE #
PERSONAL REFERENCE PHONE # BUS. PHONE #

*ANNUAL SALARY (INCLUDING FEES, TIPS, COMMISSIONS, AND BONUSES) _____

*ANNUAL SALARY (CO-APPLICANT) + _____

**ADDITIONAL ANNUAL INCOME (CHILD SUPPORT, PARENTAL SUPPORT, STOCKS, SAVINGS, INVESTMENTS, ETC.) + _____

SOURCE _____ + _____

TOTAL ANTICIPATED INCOME _____

*IF SELF EMPLOYED, WE MUST BE FURNISHED WITH YOUR MOST RECENT TAX RETURN = _____

****YOU MUST FURNISH US WITH A NOTARIZED STATEMENT OF THIS INCOME.**

AUTO TAG # & STATE _____ YEAR/MAKE/COLOR _____

CO-APPLICANT'S TAG # & STATE _____ YEAR/MAKE/COLOR _____

DO YOU OWN A MOTORCYCLE, BOAT, COMMERCIAL VEHICLE, CAMPER, TRAILER, ETC.? (IF SO, TYPE & TAG #) _____

HOW DID YOU HEAR ABOUT POST? _____

By signing below, I am stating that the information I have provided in this Application is true, correct, and complete. All persons and firms named in this Application may freely give any information concerning me that is requested, and I waive all rights of action that I may have for any consequence resulting from such information. By signing below, I authorize Post Apartment Homes, L.P. and its partners, subsidiaries, and affiliates (collectively referred to as "Post"), to release all information contained in this Application on my behalf and for my benefit.

Notice of Resident Selection Criteria: I acknowledge that Post may obtain a background report in connection with my Application and that such report may include information on my credit and criminal histories. I also acknowledge that my application may be rejected based on information contained in such reports. By signing below, I further acknowledge that I have had the opportunity to review Post's Resident Selection Criteria which include: (1) criminal history, (2) previous rental history, (3) current income, (4) credit history, (5) failure to provide accurate or complete information on the application form, and (6) any other legitimate non-discriminatory information that might be relevant to the resident selection process. If I do not meet the selection criteria, or if I provide inaccurate or incomplete information, I further acknowledge that my application may be rejected and, as provided below, my Non-Refundable Application Fee and Guarantor Fee (if any), will not be refunded.

I hereby leave the following with Post as a good faith payment in connection with this Application:

	Required Amount	Amount Paid	Date Paid
Non-Refundable Application Fee	\$ _____	\$ _____	_____
Non-Refundable Leasing Fee	\$ _____	\$ _____	_____
Reservation Fee	\$ _____	\$ _____	_____
Non-Refundable Pet Fee	\$ _____	\$ _____	_____
Refundable Pet Fee	\$ _____	\$ _____	_____
Non-Refundable Remote Fee	\$ _____	\$ _____	_____
Other	\$ _____	\$ _____	_____
Guarantor Fee	\$ _____	\$ _____	_____
Total	\$ _____	\$ _____	_____

I understand that Post will never refund my Non-Refundable Application Fee and Guarantor Fee (if any) after I sign this Application.

If Post declines my Application, I understand that Post will return all other fees listed above.

If I cancel this Application within 48 hours of submitting this Application to Post, I understand that Post will return all other fees listed above.

If I cancel this Application after 48 hours of submitting this Application to Post or if I fail to occupy the premises at the agreed upon time for any reason, I understand that Post will keep my Non-Refundable Leasing Fee and my Reservation Fee as liquidated damages. I acknowledge that any injury to Post caused by my cancellation of this Application after 48 hours or my failure to occupy the premises at the agreed upon time is too difficult to accurately estimate. I therefore agree that Post and I intend to provide for damages rather than a penalty in these situations, and that Post's retention of the sums set forth above is a reasonable estimate of Post's probable loss from such a cancellation or refusal to occupy the premises.

If I cancel this Application or fail to occupy the premises at the agreed upon time for any reason, Post will refund my Refundable Pet Fee, Non-Refundable Pet Fee, Non-Refundable Remote Fee, and amounts listed above as "Other".

I acknowledge that the Reservation Fee and Refundable Pet Fee will become my refundable security deposits and the other fees will be applied to my account as listed upon the execution of my lease. I further acknowledge that all non-refundable fees are not part of any security deposit.

Applicant's Signature _____ Co-Applicant's Signature _____

Applicant's Email Address _____ Co-Applicant's Email Address _____

Applicant's Cell Phone _____ Co-Applicant's Cell Phone _____

THIS APPLICATION IS NOT A LEASE AGREEMENT.

NAME ON CARD	_____	BILLING ADDRESS	_____
TYPE OF CARD	VISA	CITY	_____
	_____	STATE	_____
	MASTER CARD	ZIP	_____
	DISCOVER	PHONE NUMBER	_____
	AMERICAN EXPRESS		
CARD NUMBER	_____		
EXPIRATION DATE	_____		
CARDHOLDER'S EMAIL	_____		

I hereby authorize Post Apartment Homes, L. P. to charge my Credit Card for the total Amount Paid stated above and for the purposes stated in this Application for Residency.

DATE _____

 CARDHOLDER SIGNATURE



FOR MARYLAND PROPERTIES ONLY: Pursuant to Md. Code Ann., Real Prop. § 8-213, if a landlord requires from a prospective tenant any fees other than a security deposit (as defined by Md. Code Ann., Real Prop. § 8-203), and these fees exceed \$25, the landlord shall return the fees no later than 15 days following the date of occupancy or the written communication by either party to the other of a decision that no tenancy will occur. A landlord who fails to do so will be liable for twice the amount of the fees in damages. Landlords may, however, retain the portion of the fees actually expended for a credit check or other expenses arising out of the application. Post's application fee is calculated to cover the minimum possible cost of a standard credit and background check. Accordingly, and as allowed under State law, Post will retain the full application fee following the application process. Section 8-213 does not apply to any landlord who offers four or less dwelling units on one parcel of property, or to seasonal or condominium rentals. Nothing in this provision shall be deemed a waiver of any additional claims for other expenses sustained by Post arising under the terms of this application. FOR PROPERTIES LOCATED IN THE STATE OF MARYLAND ONLY, THE LANGUAGE IN THIS PARAGRAPH SUPERSEDES ANY CONTRADICTIONARY LANGUAGE IN THIS APPLICATION.