

**COURTLAND MANOR  
& Monte Carlo Apartments**

Jill Williams  
Manager  
11142 Gravois Rd., Apartment B  
St. Louis, MO 63119

Telephone (314) 842-2706  
Fax (314) 842-1875

***Welcome and Thank You for Choosing Courtland Manor and Monte Carlo Apartments. There are a few things we must ask of you to assist us in expediting your application as soon as possible.***

- ✓ 1. Complete the following information as thoroughly as possible.
- ✓ 2. Copy of your driver's license.
- ✓ 3. Copy of you proof of income...(most recent paycheck stub, SSI statement or W2).
- ✓ 4. Return all of the above with a Money Order in the amount of \$30.00 (per applicant) made payable to the appropriate complex, either Courtland Manor (1 Br. on Watson) or Monte Carlo (2 Br. on Gravois). **The application fee is non-refundable.** You must reserve an apartment by including a \$200.00 security deposit, which can be a personal check or Money Order. This will lock you into a specific apartment as soon as your application is approved. **After your approval the security deposit will no longer be refundable.** You will be sent a letter confirming your assigned apartment with a list of items that you will need to be completed prior to your lease signing and receipt of your keys.

***We appreciate your cooperation and look forward to making your stay a pleasant and comfortable experience.***

***Truly Yours,  
Jill, Marilyn, and Jim***

***PS. Any Questions? Please don't hesitate to call!***

# APPLICATION FOR RESIDENCY

*Date Completed* \_\_\_\_\_

THE  
**REGISTRY**  
*Take The Risk Out of Renting*

COURT AND CREDIT  
INFORMATION SERVICES

Name of Applicant \_\_\_\_\_ Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_ Driver's Lic. # \_\_\_\_\_

Name of Spouse \_\_\_\_\_ Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_ Driver's Lic. # \_\_\_\_\_

Mother's Maiden Name \_\_\_\_\_ Spouse's Mother's Maiden Name \_\_\_\_\_

Applicant's Present Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone # \_\_\_\_\_

Present Address is:  Own Home  Parents' Home  Rented Home  Rented Apartment  Student Housing  
 Monthly Payment: \_\_\_\_\_ Date Moved In: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date Moved Out: \_\_\_\_/\_\_\_\_/\_\_\_\_

*If Rent:* Present Landlord or Apartment Community \_\_\_\_\_ *If Own:* Name of Bank or Mortgage Company \_\_\_\_\_

Address of Present Landlord / Apartment Community / Bank / Mortgage company \_\_\_\_\_ Telephone # \_\_\_\_\_

Previous Address: \_\_\_\_\_ Telephone # \_\_\_\_\_

List all Other Persons to Occupy Apartment  Roommate  Children

Make of Car \_\_\_\_\_ Year \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_ Other Vehicles (Trucks, Boat, Motorcycle, Etc.) \_\_\_\_\_

Name of Nearest Relative \_\_\_\_\_ Address \_\_\_\_\_ Telephone # \_\_\_\_\_

Name of Personal Reference \_\_\_\_\_ Address \_\_\_\_\_ Telephone # \_\_\_\_\_

Name of Applicant's Employer \_\_\_\_\_ Type of Work \_\_\_\_\_ Supervisor \_\_\_\_\_ Salary (Monthly) \_\_\_\_\_ How Long? \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone # \_\_\_\_\_

Name of Former Employer \_\_\_\_\_ Type of Work \_\_\_\_\_ Supervisor \_\_\_\_\_ How Long? \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone # \_\_\_\_\_

Name of Spouse's Employer \_\_\_\_\_ Type of Work \_\_\_\_\_ Supervisor \_\_\_\_\_ Salary (Monthly) \_\_\_\_\_ How Long? \_\_\_\_\_

Spouse's Work Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone # \_\_\_\_\_

Other Sources of Income \_\_\_\_\_ Amount \_\_\_\_\_ When Received \_\_\_\_\_

Bank Name \_\_\_\_\_ Address \_\_\_\_\_  Checking  Savings  Loan Account # \_\_\_\_\_

Bank Name \_\_\_\_\_ Address \_\_\_\_\_  Checking  Savings  Loan Account# \_\_\_\_\_

Credit Reference Name Address  Credit Card  Loan Account #

Credit Reference Name Address  Credit Card  Loan Account #

Why are you leaving your present residence? How far away do you work? (miles)

I have you been previously convicted of any criminal offense?  Yes  No If yes, give details and dates:

Any litigation, such as: evictions, suits, judgments, bankruptcies, foreclosures, etc.?  Yes  No If yes, give details and dates:

In Case of Emergency Notify: Telephone #

Street Address: City: State: Zip:

✓ **PLEASE READ ALL TERMS BELOW AND SIGN:**

It is understood that the premises are to be used as a residence to be occupied by not more than \_\_\_ persons and that occupancy is subject to possession being delivered by present occupant. An application fee in the sum of \$ \_\_\_ received on \_\_\_ (date) has been deposited with Landlord, with the clear understanding that this application, including each prospective occupant, is subject to approval and acceptance by Landlord in its sole discretion. I hereby authorize Landlord to obtain information it deems desirable in the processing of my application, including; credit reports, civil or criminal actions, rental history, employment/salary details, police and vehicle records, and any other relevant information; and release Landlord, its employees and agents from all liability for any damage whatsoever incurred in furnishing or obtaining such information. Upon approval and acceptance, the applicant agrees to execute a lease before possession is given and to pay the security deposit and the first month's rent within five days after being notified of acceptance (time being of the essence); failing which the application fee shall be retained by Landlord as the agreed compensation for credit investigation, processing and verification of the application, other expenses and/or loss of rent, and the Landlord shall have no further obligation to applicant. In no event is the application fee refundable to the applicant, except in the event that Landlord fails to deliver possession of the premises as may be required by any lease executed between the parties. The applicant hereby waives any claim for damages by reason of non-acceptance of this application which the Landlord or his agent may reject without stating reasons for so doing. It is further agreed that if any information herein is false, the lease made on the strength of this application may, at the option of the Landlord, be terminated at any time.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*(For Office Use Only)*

Member #: \_\_\_\_\_ Manager's Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Property Name/Company: \_\_\_\_\_ Fax #: \_\_\_\_\_

- Registry Check
- Risk source
- Wanted Fugitive Search
- TRW Credit Report
- Trans Union Credit Report
- Equifax Credit Report
- Please Fax Me the Reports
- Please Mail Me the Reports

Fax or Mail Attention: Jill Williams

CrimCheck

to: CrimCheck America

from: (your name) \_\_\_\_\_

America.

Fax no: (800) 866-7344

member name: \_\_\_\_\_

267 Kentlands Blvd., Suite 1046  
Galthersburg, Maryland 20878  
(888) 274-7344  
Fax: (800) 866-7344

Date: \_\_\_\_\_

member no: 16500

member fax no: (314) 842-1875

Fax transmittal  
National Criminal **check** request

Please run a Criminal Check on the following applicants (please print clearly):

Applicant's Full Name: \_\_\_\_\_

SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Please check the address(es) you would like run:

Current Address: \_\_\_\_\_  
Street Address Apt. No. City State/Zip

Previous Address: \_\_\_\_\_  
Street Address Apt. No. City State/Zip

Previous Address: \_\_\_\_\_  
Street Address Apt. No. City State/Zip

Applicant's Full Name: \_\_\_\_\_

SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Please check the address(es) you would like run:

Current Address: \_\_\_\_\_  
Street Address Apt. No. City State/Zip

Previous Address: \_\_\_\_\_  
Street Address Apt. No. City State/Zip

Previous Address: \_\_\_\_\_  
Street Address Apt. No. City State/Zip

Applicant's Full Name: \_\_\_\_\_

SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Please check the address(es) you would like run:

Current Address: \_\_\_\_\_  
Street Address Apt. No. City State/Zip

Previous Address: \_\_\_\_\_  
Street Address Apt. No. City State/Zip

Previous Address: \_\_\_\_\_  
Street Address Apt. No. City State/Zip

Applicant's Full Name: \_\_\_\_\_

SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Please check the address(es) you would like run:

Current Address: \_\_\_\_\_  
Street Address Apt. No. City State/Zip

Previous Address: \_\_\_\_\_  
Street Address Apt. No. City State/Zip

Previous Address: \_\_\_\_\_  
Street Address Apt. No. City State/Zip

The information contained in this facsimile is confidential-limited to the express use of the party(ies) above. If you are not the above named party, you are hereby notified that any use, dissemination, distribution, or copying of this transmission is strictly prohibited. If you receive this transmission in error, please notify us by phone immediately at (888) 274-7344 and return the original transmission to CrimCheck America, 267 Kentlands Blvd. Ste. 1046, Galthersburg, Maryland 20878. Thank You.

THE  
**REGISTRY**  
*Take The Risk Out of Renting*

Fax transmittal

(For Office Use Only)

TO: The Registry fax: 1-800-366-7344

FROM: Monte Carlo Apartments  
Property Name

16500  
Account Number

Jill Williams  
Name of person requesting report

Please have these applications:  Faxed back to me at (314) 842-1875

Or  Mailed back to me

We are requesting:  
(Check as many as needed)

Registry Check (Housing court search)

TRW Credit Report

Trans Union Credit Report

CBI/Equifax Credit Report

Wanted fugitive check

Credit Gram

Please fill in required information, read all terms carefully and sign below:

Landlord's Name: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_ Soc. Sec. #: \_\_\_\_\_ DOB: \_\_\_\_\_

Present Address: \_\_\_\_\_

Previous Address: \_\_\_\_\_

I hereby authorize Landlord (as listed above) to obtain information it deems desirable in the processing of my application, including: credit reports, civil or criminal actions, rental history, employment/salary details, police and vehicle records, and any other relevant information; and release Landlord, its employees and agents from all liability for any damage whatsoever incurred in furnishing or obtaining such information. I agree to pay a nonrefundable application fee retained by Landlord as the agreed compensation for credit investigation, processing and verification of the application, other expenses and/or loss of rent, and the Landlord shall have no further obligation to applicant. In no event is the application fee refundable to the applicant, except in the event that Landlord fails to deliver possession of the premises as may be required by any lease executed between the parties. The applicant hereby waives any claim for damages by reason of non-acceptance of this application which the Landlord or his agent may reject.

Signature: X \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_