

APPLICATION FOR OCCUPANCY

Applicant's Name: _____ Date: _____

Size Apartment Desired: _____ Date Range Needed By: _____ to _____

All persons to Occupy Apartment:

FULL NAME	RELATIONSHIP TO APPLICANT	DATE OF BIRTH	SOCIAL SECURITY# or ITIN #
1. _____	Myself	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____
6. _____	_____	_____	_____

**MUST PROVIDE 2 COMPLETE YEARS OF RESIDENCY HISTORY
(IF MORE THAN 2 RESIDENCES IN PAST 24 MONTHS PLEASE WRITE INFORMATION ON BACK OF PAGE)**

Present Address: _____
Street Apt. # City State Zip

Home Phone #: (____) _____ Work Phone #: (____) _____ Cell Phone #: (____) _____

Email: _____

Landlord or Mortgagee: _____
Company Contact Phone #

Monthly Payment: \$ _____ Dates of Occupancy: _____
MM/DD/YYYY To MM/DD/YYYY

Reason for Moving: _____ Lease Expires: _____

Previous Address: _____
Street Apt. # City State Zip

Landlord or Mortgagee: _____
Company Contact Phone #

Monthly Payment: \$ _____ Dates of Occupancy: _____
MM/DD/YYYY To MM/DD/YYYY

Reason for Moving: _____ Lease Expires: _____

Have you ever lived at this Apartment Community? Yes No If yes, under what name? _____

At What Address: _____ Dates: _____

Applicant's Employer: _____ How long? _____

Address: _____ Phone #: _____

Position: _____ Supervisor: _____

Monthly Income: \$ _____ Other Income (Social Security/Pension): \$ _____

Co-Applicant's Employer: _____ How long? _____

Address: _____ Phone #: _____

Position: _____ Supervisor: _____

Monthly Income: \$ _____ Other Income (Social Security/Pension): \$ _____

Do you have a pet? Yes No If yes, answer the following:

Number of pets: _____ Breed (If mixed, enter all breeds(s): _____ Weight: _____

Spayed/Neutered? Yes No Current on Vaccinations? Yes No

(CONTINUED ON NEXT PAGE)

Has any person who is identified as an occupant above ever been convicted of (including guilty plea) any misdemeanor or felony? If so, explain here: _____

Is any person who is identified as an occupant above required to register, under the law of any state or of the United States, as a sex offender, domestic abuser or child molester? If so, explain here: _____

Does any person who is identified as an occupant above currently use or consume any controlled substance without a valid prescription? If so, explain here: _____

Applicant(s) hereby applies for an apartment and agrees as follows:

- (1) That the deposit is earnest money. In the event an apartment is offered and a lease agreement is not executed, for any reason, deposit will be retained and applied to the costs of processing application and obtaining another resident for apartment.
- (2) That my deposit will be refunded if my application is rejected by you, less application fee.
- (3) That, in the event my check is returned to you for non-payment, I will be charged, in addition to the original application fee and hold deposit, an NSF Fee of \$50.00.
- (4) That, in the event any statement contained herein is untrue, application will be rejected and deposit will be retained to offset costs of processing, of obtaining resident for apartment, and other sales costs incurred in relation to applicant(s). In the event such untruth is discovered after execution of a lease, such lease will be voidable in the sole discretion of owner/landlord.
- (5) That neither applicant(s) nor any occupant or guest obtains any rights from, or is entitled to rely upon, any investigation or process undertaken by the owner/landlord as to any other applicant or resident.

I certify that all of the above statements are true and complete. Inquiries may be made to verify the statements herein. I understand that a credit report may be made to establish my eligibility for an apartment and my signature below authorizes the investigation.

Signature _____ Date _____

Signature _____ Date _____

Application Received By: _____ Date _____ Time: _____

Print Name: _____

FOR OFFICE USE ONLY

Applicant Name _____

Co-Applicant Name _____

HOLD DEPOSIT PAID APPLICATION FEE PAID DATE PD: _____
 ASSIGNED UNIT: PHASE # _____ BLDG # _____ APT. # _____
 UNASSIGNED DATE RANGE APT. NEEDED: _____
 SIZE APT. _____ BASE RENT \$ _____ LEASE TERM _____
 SPECIALS? _____
 AGENT PROCURRING LEASE: _____
 CHECKED BAD RISK TENANT LIST:
 APPLICATION ENTERED INTO ONESITE: ____/____/____

REFERENCE REPORT

1. LANDLORD REFERENCES	PRESENT LANDLORD	PREVIOUS LANDLORD
LENGTH OF TENANCY:	_____	_____
LEASE TERM FULFILLED?	_____	_____
RENT PAID ON TIME?	_____	_____
MONTHLY RENT AMOUNT?	_____	_____
ANY OUTSTANDING BALANCE?	_____	_____
CONDITION UPON VACATING?	_____	_____
ANY PETS?	_____	_____
PERSON SPOKE WITH:	_____	_____
DATE INFO RECEIVED:	_____	_____

2. INCOME VERIFICATION

	INCOME SOURCE:	MTHLY INCOME AMT:	NAME OF PERSON SPOKE WITH (if applicable):
APPLICANT	_____	_____	_____
CO-APPLICANT	_____	_____	_____

3. CREDIT REPORT RECEIVED FROM CREDIT BUREAU FOR EACH ADULT APPLICANT:

CREDIT REPORT SATISFACTORY YES NO IF NO, CREDIT CRITERIA WAIVER? YES NO

FOR MANAGER'S USE ONLY

[] APPROVED DATE: _____ BY: _____

[] REJECTED DATE: _____ BY: _____

REASON(S) _____

REJECTION LETTER SENT: _____ DATE: _____

IF ACCEPTED, SCHEDULE MOVE-IN.

MOVE-IN DATE: DAY _____ DATE _____ TIME _____