

Property Address you are applying for: _____

Time Period: _____ to _____

Application Requirements: All adult applicants 18 or older must submit a fully completed, dated and signed residency application and fee. Applicant must provide a state issued photo identification card or a driver's license, and a social security card. A non-refundable application fee of **\$50.00** will be required for all adult applicants.

Income Requirements: Applicants must have a combined income of at least three times the monthly rent. We reserve the right to require a co-signer. A minimum of two years residential history is required. Self-employed applicants are required to produce, upon request, bank statements and possibly two years of tax returns or 1099's. Non-employed individuals must provide proof of income or funds. All sources of other income must be verifiable if needed to qualify for a rental unit. **Employed individuals please provide last 2 paystubs and /or New Employer Offer Letter.**

Credit Reporting: Our company policy is to report all non-compliances with the terms of your rental agreement or failure to pay rent as agreed, or any amounts owed to any or all of the various credit reporting agencies.

Background Investigation Requirements: Criminal records must contain no convictions for felonies within the past seven years and no sexual offenses ever. In the event a record comes back "adjudication withheld" further documentation may be required and applicant may be denied on this basis.

Rental/Mortgage Requirements: Previous rental history from landlords must reflect timely payment, sufficient notice of intent to vacate, no complaints regarding noise, disturbance or illegal activities, no **unpaid NSF checks**, and no damage to unit or failure to leave the property clean and without damage at time of lease termination.

Renters Insurance Policy: You must have an insurance policy to cover the contents of your home. This is a standard policy your insurance agent can issue. If you have pets, your policy must cover them also.

Pet Policy: Non-refundable pet deposit and/or pet rents are established on a per property and per pet basis.

Holding or Good Faith Deposit Requirements: We require a holding or good faith deposit to be collected to hold a property off the market. In the event the application is approved and applicant fails to enter into a lease, the applicant shall forfeit this deposit. In the event the application is approved, this deposit shall be applied to the required security deposit. **Liquid Furniture:** Not allowed, no water beds.

Occupancy Requirements: The number of occupants must be in compliance with HUD standards and guidelines for the applied for unit. The standards are as follows: No more than 2 persons may occupy a 1 bedroom dwelling ... No more than 4 persons may occupy a 2 bedroom dwelling ... No more than 6 persons may occupy a 3 bedroom dwelling ... No more than 8 persons may occupy a 4 bedroom dwelling.

No Verbal Agreements: Any exceptions to our criteria must be submitted in writing to the landlord for consideration. If approval is then given for such exceptions, additional security, co- signers, and/or additional advance rent payments may be required. No verbal agreements will be executed or honored. Any agreements must be in writing and signed by both parties. **This signed page also serves as authorization for your previous landlord to comment on your tenancy and employer to verify your employment.** By signing below, I indicate that I have read the above rental agreements and fully agree to the rental agreements.

_____/____/____
Applicant Signature Printed Name Date

Contact info.(tel.# and email): _____/_____

RENTAL APPLICATION

APPLICANT NAME _____ Sex ___ Marital Status _____
Date of Birth ___/___/___ SSN ___--___--___ Drivers License _____ State _____
Phone: _____ Cell#: _____ Email: _____

PRESENT ADDRESS _____
City _____ State ___ ZIP _____ Move In Date ___/___/___ Moved out ___/___/___
Landlord _____ Phone _____ Email: _____ Why Move? _____

PREVIOUS ADDRESS _____
City _____ State ___ ZIP _____ Ph _____ Move In Date ___/___/___ Moved out ___/___/___
Landlord _____ Phone _____ Email: _____ Why Move? _____

PREVIOUS ADDRESS _____
City _____ State ___ ZIP _____ Ph _____ Move In Date ___/___/___ Moved out ___/___/___
Landlord _____ Ph _____ Email: _____ Why Move? _____

New Employer (if you are transferring here for new employment): _____
Human Resources Contact Person: _____ Phone: _____ Email: _____
Start Date _____ Monthly Income/Salary \$ _____
Occupation _____ Supervisor _____ Phone _____

PRESENT EMPLOYER _____
Occupation _____ Supervisor _____ Phone _____
How long employed _____ Monthly Income/Salary \$ _____
Email: _____

PREVIOUS EMPLOYER _____
Occupation _____ Supervisor _____ Phone _____
How long employed _____ Monthly Income/Salary \$ _____
Email: _____

Have you ever been evicted?..... Yes No
Have you ever broken a rental or lease agreement?..... Yes No
Have you ever declared bankruptcy?..... Yes No
Have you ever been sued for nonpayment of rent?..... Yes No
Have you ever been sued for damages to rental property?..... Yes No
Have you ever been arrested?..... Yes No
Do you have any pets or do you plan to acquire any?..... Yes No

If yes, describe pets (specifically breeds of dogs):

_____ (Note: Dogs on the insurance companies' aggressive breeds list not allowed, such as pit bulls and rottweilers.)

The undersigned represents the above statements are true and complete and hereby authorizes verification of any and all information. This application shall become an addendum to the Rental Contract when said contract is signed by Tenant(s). I hereby authorize the verification of all above information by The Rental Property Network, Inc. including my credit, rental, check writing, employment history including salary and previous landlord. Application is hereby made and accepted pending verification and suitability of information listed and credit approval.

_____/___/___
Applicant Date

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LIST ALL PERSONS TO OCCUPY THE PREMISES. (ONLY THESE PERSONS WILL BE PERMITTED IN THE RESIDENCE)

Name _____ Age _____ Relationship _____

Name _____ Age _____ Relationship _____

Name _____ Age _____ Relationship _____

Name _____ Age _____ Relationship _____

Name _____ Age _____ Relationship _____

Name _____ Age _____ Relationship _____

Name _____ Age _____ Relationship _____

Name _____ Age _____ Relationship _____

Name _____ Age _____ Relationship _____

Name _____ Age _____ Relationship _____

LIST ALL VEHICLES TO BE PRESENT ON THE PREMISES. (ONLY THESE WILL BE PERMITTED)

AUTOS / MOTORCYCLES

Make _____ Model _____ Color _____ Year ___ Tag No _____

Make _____ Model _____ Color _____ Year ___ Tag No _____

TRUCKS/PICKUPS

Make _____ Model _____ Color _____ Year ___ Tag No _____

Make _____ Model _____ Color _____ Year ___ Tag No _____

CAMPERS/BOATS/TRAILERS

Make _____ Model _____ Color _____ Year ___ Tag No _____

Make _____ Model _____ Color _____ Year ___ Tag No _____

PERSONAL REFERENCES - IN CASE OF EMERGENCY

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

Family Attorney: _____ Phone _____