The Chadwick Apartments Rental Application

12412 S. 36th street Bellevue, NE 68123 (402) 291-1656 info@thechadwickapts.com Thechadwickapts.com

(For office use only)			
# of Apps: Apt # Unit Siz	ze		
Each adult over the age of 19 must compaphication. There is a non-refundable applied of \$50.00 / per app. Check or money order if form of payment accepted Drivers License	lication fee		

<u>Thechadwickapts.com</u>)orm o	Drivers License	
Today's Date:	P	roposed Move-in Date: _		
1	(FULL NAME	hereby make application	on to rent an apartment at	the premises
known as; The Chadwick Apartments,	12412 S. 36th street, Bell	evue, NE 68123 to be us	ed for living purposes and	l no other
purpose. I understand that the following	Monthly Rental Rates will	be in effect and are paya	ble in advance to The Cha	ıdwick
Apartments Leasing Office. :				
Thre	ee-bedroom unit: \$ <u>1,51</u>	<u>0.00</u> - (Deposit: \$800.	00)	
Tw	o-bedroom unit: \$ <u>1,295</u>	5 <u>.00</u> - (Deposit: \$700.0	0)	
0	ne-bedroom unit: \$ <u>995</u> .	<u>.00</u> - (Deposit:\$600.00)	
I agree to sign a 12 month rental agreen	nent with the understanding	g that upon expiration of	said lease, I am to give or	ie full
calendar month prior written notice before	re vacating the premises if	I decide to do so.		
payments, which may affect application for processing the application and cre of age must fill out an application and	edit report (via The Chad			
First Name:	Middle initial:	Last Name:		
Other names you have used in the past: _				
Social Security #:				
Date of birth (MM/DD/YYYY):	//			
Present Address/City/State/Zip Code:		/	//////	
How long have you lived at your present	address:			
Why are you moving from your current a	address?			
Phone #:				
Email Address:				
Do you own a pet? Y / N If yes, what k	ind/how many? (limit of 2	pets per apartment)		

Current Landlord Name, Address and P	hone Number: How long at this address:		
	as Namehou fuom the leat 2 moone.		
Previous Landlord Name, Address, Phon			
How long at this address: How long at this address: How long at this address:			
Have you ever been evicted, or owe any l			
If yes, please explain:			
Current Employer:	Rank (if military):		
Occupation:	Length of employment:		
	Phone #:		
Monthly gross income:			
If "yes," please explain: We will submit a credit check and criminal be	nal offense other than a minor traffic violation? Yes \ No background check. Is there anything negative we will find that you wish to		
comment on?			
Reference (financial): Example; credit card	d, student loan, car loan etc.		
Name (financial):			
Phone #:			
Emergency Contact (relative or friend):			
Name:			
Address:			
Phone #:			

**Vehicle information is R	<u>EQUIRED</u> to av	void an accid	ental tow.	
List all motor vehicles own	ed, including me	otorcycles: (# of vehicles)
Make:M	lodel:	_Year:	Color:	Lic. Plate #:
Make:M	lodel:	_Year:	Color:	Lic. Plate #:
Make:M	lodel:	_Year:	Color:	Lic. Plate #:
Name & date of birth of all	minors/depend	lants under t	he age of 19 who	will be residing in the apartment:
Name:		DOB:		
Name:				
Name:				
Applicant Signature:				Date:
Non-Refundable Hole	ding Deposit			
tenant(s) for rental of this application of the position of this application of this application of this application of this application of the position of th	artment up and unt will be credited that if I should ent the apartment of due upon move that Landlord may contact the contact that the apartment of the contact that the contact	to my securit change my m t, this holding e in the amount	nencement of my in y deposit when I is a deposit will be for any of \$\frac{1}{2}\$ rent to me for any in the interval of \$\frac{1}{2}\$.	nable to move in for any reason, other than Landlord orfeited by me, and I will receive no refund of the
		(Fo	r (office use only)	
non-refundable holding depo	osit for:		1 \$rep	presenting the The Chadwick Apartments and a
This holding deposit shall be any reason, other than Landle	e credited to the to ord's decision no right to not rent	enant's securion to rent the a to this apartm	ty deposit upon m partment, this hol ent for any reasor	ove-in. However, if the tenant does not move in for ding deposit shall be forever forfeited and shall not be a and in my own sole discretion, however, if I so
Landlord Signature				Date
Application:	Taken Bv	Date	: A	pproved // Denied By:
Application Fee:				Method of Payment:
Holding/Security Deposit:	\$ \$			Method of Payment:
5 2	· ———			

Rental Verification Request

Applicant: DO NOT complete this form - please sign and date below (where highlighted) ONLY

The person(s) named below has submitted an application for rental. In the process of approval a verification of the applicant's rental history is required. The applicant, by his/her signature, has authorized you to release the required information listed below.

I, <u>APPLICANT</u>, HEREBY AUTHORIZE THE DISCLOSURE OF THE INFORMATION REQUESTED BY CHADWICK APARTMENTS MANAGEMENT AND ITS EMPLOYEES. THANK YOU FOR PROVIDING THIS INFORMATION SO THAT MY APPLICATION FOR AN APARTMENT CAN BE PROCESSED.

Applicant Name (Print):				
Applicant Signature:	icant Signature:Date:			
ATTENTION:	DATE	: :		
FROM: The Chadwick Apartments Property Name		Leasing Agent/Manager Title		
Office Phone: (402) 291-1656	Return Email Address: info@thechadwickapts.com			
The person(s) named above has submitted an app	plication for rental. In the p	process of approval a verification of the applicant's		
rental history is required. The applicant, by his/he	er signature, has authorized	d you to release the required information listed belo		
Please provide us with the following informati	ion:			
Monthly Rent Amount: \$				
1. Move-In Date:	Move-Out/Lease Expire	e Date:		
2. Was the Lease Agreement Fulfilled?	Yes	NO		
3. Was proper notice given?	Yes	NO		
4. Was rent paid:	On Time	Occasionally Late (5 times/yr or less)		
	# times late in past	t 12 months (5 times/yr or more)		
5. Were there any Lease Violations?	Yes	NO		
If yes, please explain:				
6. Any NSF (non-sufficient funds) checks?	Yes	NO		
7. Was the Security Deposit refunded?	Yes	NO		
8. Would you rent to this applicant again?	Yes	NO		
Information Provided By: Name (please print)				
Name (please print)				
		Date:		
Signature				