## **Three Angels Apartments Leasing Application**

Address Applying For Date of Application: _	Desire	ed Occupancy Date	e:	Desired	Unit (# of B	Sedrooms):	_
PER	SONAL INFORMA	ATION – PRIMA	ARY LE	ASE HOLI	DER APP	LICANT	
Full Name			DOB:				
Mobile Phone:			Social Security #:				
Work Phone:			Email Address:				
	AL OCCUPANTS (I lications must be compl						) Note:
Full Name	Full Name Relationship		Date of Birth		th	Social Security #	
		EMPLOYMEN	T INFO	DRMATIO:	N		
Primary Applicant Current Employer		J	ob Title				
Length of Employment//		// S	Supervisor Name				
Address/Phone Number							
Previous Employer		J	ob Title				
Length of Employment//		// S	Supervisor Name				
Address/Phone Number							
		RENTAI	L HISTO	ORY			
<b>Current Address</b>		N	Name of C	Complex			
Length of Lease	/	// P	hone Nu	mber:			
Previous Address		N	Name of C	Complex			
I ength of I ease		// p	hone Nu	mher·			

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## **Authorization Page**

1.		Application Fee
	(Initials)	The Undersigned Applicant has submitted the Application Fee in the sum of \$50 per application, which is Non Refundable payment for a credit check and processing charges associated with this application. Sum is non rental payment or deposit amount. In the even this application is approved/declined by Owner or cancelled by the applicant this sum is nonrefundable. This application must be signed before Owner can process it. Applicant understands that the Owner may obtain a credit report in the future without future authorization of Applicant in the event of default of the lease agreement or other rental agreements between Owner and Applicant.
2.		Holding Deposit/Security Deposit & Admin Fee
	(Initials)	If my application is accepted, half of the security deposit must be paid within 2 days of approval which will be the holding deposit. Once the Applicant moves in, the holding deposit will be transferred and used as the Security Deposit. Applicant also understand that a higher security deposit may be required due to credit, rental history, income, etc. (NO UNIT IS HELD UNLESS HALF OF THE SECURITY DEPOSIT IS PAID).
		At the time of move in, there is an admin fee of \$50 that will be added and is the tenant's responsibility.
3.		Cancellation/Forfeiture of Deposit
	(Initials)	I understand once the security deposit/holding deposit is received, if I cancel the application or refuse to occupy the premises, or if any changes occur to this application, including, but not limited to income and occupancy, then I understand that the security deposit will be retained by Owner as liquidated damages after 48 hours once received. Retention of deposit shall in no way be interpreted as preventing the landlord from obtaining damages for the breach of lease agreement of any other rental agreement between Owner and Applicant.
4.		Authorization
	(Initials)	Applicant authorizes Owner to contact current and previous landlords and employers to release requested information to Owner. Applicant also authorizes Owner to obtain a consumer credit report and run a background check on the Applicant and/or occupant(s). Applicants understand that application(s) may be denied because of credit, landlord history, insufficient* income or criminal background history. Co-signers are not allowed to supplement household income. Co-signers are no longer allowed. (*income should be 3 times the rental rate). Applications will be denied with previous felony charges within the last 10 years.
5.		Occupants on Application
σ.	(Initials)	Applicant understands that all adult applicants must complete their own application and all adults must be approved. Failure to list ALL occupants will result in a violation of lease agreement and could result in an eviction. Applicant must list all adult applicants and children who will be occupying the unit. Applicant has confirmed that all occupants are listed on application.
Date: _		
Applica	ant Signature:	
Printed	Name:	

TOTAL NET MONTHLY INCO	ME FOR HOUSEHOLD:			
	OTHER INFO	RMATION		
Have you rented from us before or re	ented or from another proper	ty we are affiliated w	vith?	
If so, where and when?				
Have you ever been convicted of a crit	me?			
If so, what type?				
Have you ever been evicted?				
On what grounds?				
Do you have a Pet? Type:	Breed(s):		How many?	
	EMERGENCY			
Name	Address	I	Phone	
NOTE: FAILURE TO COMPLETED THIS APPLICATION IS GROUNDS			MAKING FALSE STATEN	MENTS ON
The \$50 fee (per applicant) to process	s this application is NON RE	FUNDABLE.		
Application will automatically be rejo	ected on <u>ANY APPLICANT</u>	who has had a felony	charge within the past ten	years.
Applicant has confirmed that all occu all occupants is a violation of your lea	_			ilure to list
Date:				
Primary Applicant Signature:				
To comple	ete application process you	ı must supply the f	ollowing:	

- Completed Application and Authorization page
- Proof of employment (past 2 paystubs or letter from employer. If military copy of LES)
- Copy of driver's licenses for all lease holders
- Landlord Verification (complete top portion and sign and date the bottom. We will send the Landlord Verification to your current/previous landlord)
- Application fee(s) \$50/Adult. Application waived for Military

## **Rental Verification**

Applicant's Name:				
Address:				
Name of Complex/Agency:	Phone Number:			
Check One (Current Landlord/ Previous Landlord)				
TO BE COMPLETED BY LAN	DLORD/AGENCY			
1. How long did (has) the resident reside(d) at this address?	Lease Dates?			
2. How many bedrooms and baths?				
3. Why did the resident move out?				
4. Have/Did they give proper notice to vacate?				
5. How much is the resident currently past due?	Describe			
RENTAL PAYMENT				
6. What was (is) monthly rental amount?	Security Deposit?			
7. Has the tenant ever been late in payment of the monthly rent?				
8. If yes, how many times late? how late? (5 <sup>th</sup> , 15 <sup>th</sup> , etc)?_				
9. Did (have) you ever begin (begun) eviction proceedings for nor	npayment?			
If yes, please describe				
APARTMENT UPKEEP				
10. Did (does) tenant maintain desirable living conditions: i.e., clea	nn. well kept?			
If no, describe	-			
11. Did (will) you keep any portion of the security deposit?				
12. Did (does) resident:get along with other neighbors? -Or-				
13. Did (does) resident ever permit persons other than those on the				
14. Has the resident ever given you false information? I				
15. Did the resident, family members or guests ever damage or van Create and physical hazards to the property or residents?				
16. Would you re-admit this resident to your property?				
17. Additional comments:				
Date Completed:				
Name of Person Completed:				
Name of Property/Agency:	-			