	Address Applyi Date of Applica		Do	esired Occupancy	Date:	Desired	Unit (# of I	Bedrooms):	_
		PERS	ONAL INFOR	RMATION – PRI	MARY LI	EASE HOL	DER APP	LICANT	
Full Name				DOB:					
Mobile Phone:					Social Security #:				
Work Phone:					Email Address:				
	ADDI			$\Gamma \mathbf{S}$ (List every occup ompleted by all adult					n.) Note:
	Full Name			Relationship		Date of Birth		Social Security	#
				EMPLOYN	TENT INFO	 ORMATIO	N		
Primary Applicant Current Employer			Job Title						
Length of Employment			/		Superviso	Supervisor Name			
Addr	ess/Phone Numb	oer							
Previous Employer					Job Title	Job Title			
Length of Employment			/		Superviso	Supervisor Name			
Addr	ess/Phone Numb	oer							
			<u> </u>	REN	TAL HIST	ORY			
Current Address					Name of	Complex			
Length of Lease			/		Phone Nu	Phone Number:			
Previous Address					Name of	Complex			
Length of Lease			/		Phone Nu	Phone Number:			

Authorization Page

Application Fee 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.
Holding Deposit/Security Deposit
If my application is accepted, half of the security deposit must be paid within 2 days of approva 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).
Cancellation/Forfeiture of Deposit
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.
Authorization
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. (*income should be 2.5 times the rental rate).
Occupants on Application
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.

OTHER INFORMATION

Have you rented from us	before or rented	or from another property we	are affiliated with?	
If so, where and when? _				
Have you ever been convi	cted of a crime?			
If so, what type?				
Have you ever been evicte	ed?	_		
On what grounds?				
Do you have a Pet?	Type:	Breed(s):	How many?	
		EMERGENCY CON	TACT	
Name	Ac	ldress	Phone	
THIS APPLICATION IS	S GROUNDS FO	TILL OUT THIS APPLICATI R IMMEDIATE REJECTIO	ON, AND/OR MAKING FALSE STATEN N.	MENTS O
The \$50 fee (per applicar	it) to process this	application is NON REFUNI	DABLE.	
Application will automat	ically be rejected	on <u>ANY APPLICANT</u> who l	as had a felony charge within the past ten	years.
		ts that will be residing in unit greement and could be subjec	is listed on the application. If approved, fa t to an eviction.	ailure to lis
Date:				
Primary Applicant Sign	nature:			
	To complete o	nnlication process you mu	et supply the following:	

To complete application process you must supply the following:

- 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	NDLORD/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 th , 15 th , etc)?			
9. Did (have) you ever begin (begun) eviction proceedings for no If yes, please describe			
APARTMENT UPKEEP			
10. Did (does) tenant maintain desirable living conditions: i.e., cle	ean, 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?	If yes, describe		
15. Did the resident, family members or guests ever damage or va Create and physical hazards to the property or residents?	andalize surrounding common/public areas?		
16. Would you re-admit this resident to your property?			
17. Additional comments:			
Date Completed:			
Name of Person Completed:			
Name of Property/Agency:			