

Please Tell Us About Yourself (Fill In All Spaces):

Full Name (as listed on Government issued ID): _____
Date of Birth: _____ Social Security # _____ Government Issued ID _____ State _____
How did you hear about us? _____ Present Phone No.(_____) _____
What is your reason for moving? _____

How many people will be living in your apartment? _____

Information about other occupants (Separate Application Required for all Adults (any occupant 18 years or older).

Table with 4 columns: Name, Relationship, Date of Birth, Social Security No. and 4 rows of occupant information.

Will a pet or assistive animal of any type live in your apartment? Yes [X] No [X] If Yes, please describe:
Type _____ Age _____ Weight (Full Grown) _____ License Date _____ Spay/Neuter Yes [X] No [X]
Breed (If mixed, provide all significant blood lines) _____ Assistive Animal: Yes [X] No [X]

Residence Information (Please provide residence history for a minimum of the last two (2) years):

Current Residence: Address _____ apt# _____ City/State _____ Zip Code _____
How long have you lived at this address? Move In: _____ to _____ Move-Out Monthly Payment:\$ _____
Name of Landlord/Apt. Complex/Mtg.Co _____ Phone # Landlord/Apt. Complex/Mtg.Co(_____) _____

If less than two (2) years at your present address, list previous addresses below:

Previous Residence: Address _____ apt# _____ City/State _____ Zip Code _____
How long have you lived at this address? Move In: _____ to _____ Move-Out Monthly Payment:\$ _____
Name of Landlord/Apt. Complex/Mtg.Co _____ Phone # Landlord/Apt. Complex/Mtg.Co(_____) _____

Previous Residence: Address _____ apt# _____ City/State _____ Zip Code _____
How long have you lived at this address? Move In: _____ to _____ Move-Out Monthly Payment:\$ _____
Name of Landlord/Apt. Complex/Mtg.Co _____ Phone # Landlord/Apt. Complex/Mtg.Co(_____) _____

Employment Information: (Please provide employment history for the last two (2) years):

Currently Employed by: _____ Address _____
Phone #(_____) _____ Position _____ Date of Hire _____ Monthly Income:\$ _____
If you have other source(s) of Income that you want considered, please list, including amount and when received:

If less than two (2) years at your present employer, list previous employer below:

Employed by: _____ Address _____
Phone #(_____) _____ Position _____ Dates of employment _____ - _____ Monthly Income:\$ _____

Vehicle(s) that you plan to park on Property (Automobile, Truck or Motorcycle):

Table with 5 columns: Make/Model, Year, Color, License Plate #, State and 2 rows of vehicle information.

Please give us the following information:

Do you have charges pending against you for any criminal offense(s)? Yes No

Have you ever been convicted of a felony **or any crime** related to harm caused to a person or property, including but not limited to arson, assault, intimidation, sex crimes, drug-related offenses, theft, dishonesty, prostitution, obscenity or related violations? Yes

No If "Yes" to either of these questions, give details and dates: _____

Any litigation, such as: evictions, suits, judgments, bankruptcies, foreclosures, liens, etc (including those that have been satisfied)?

Yes No If "Yes", give details and dates: _____

Have you ever left an apartment community or rental home without fulfilling the lease or owing a balance? Yes No

If "Yes" to the above question, give details and dates: _____

Person to notify and person you authorize to take possession of your personal property in case of an emergency:

Name _____ Relationship _____ Home Phone(____) _____ Work Phone(____) _____

Address _____ City/State _____ Zip _____

Note: Management is NOT responsible for damage to residents' property unless caused by neglect on the part of management or an employee of management. Residents are strongly advised to obtain renters insurance to cover loss or damage to their property.

Please read carefully and sign below:

DEPOSIT TO HOLD AGREEMENT

I am requesting you reserve Apt # _____ for me until _____ 20 ____.
I agree to pay the sum of \$ _____ as a holding deposit, which I understand becomes non-refundable 72 hours from today, at _____ am/pm **and** the sum of \$ _____, which is a **non-refundable application fee(s)** required for administrative processing. All monies received are deposited the same day. If applicant cancels within the specified cancellation period, or is declined, a refund check equal to the amount of the reservation deposit will be mailed within 14 business days. All returned checks are subject to a returned check fee of \$50.00. Cancellation after this time will result in forfeiture of my holding deposit. I must pay rent on or before my "rent start date" or my holding deposit will be forfeited and the apartment rented. I understand that Management and Management's employees are agents of and represent the owner.

***Please refer to your move-in cost sheet for itemized rental agreement information.**

Applicant represents that all the above statements are true and complete, and hereby authorizes verification of above information, references and credit records. Applicant acknowledges that false information contained herein constitutes grounds for rejection of this Application if discovered before move-in. Applicant acknowledges that management may not be able to complete a comprehensive evaluation of this Agreement before move-in. Management reserves the right to verify Application information after move-in and may convert the proposed Rental Agreement to a month-to-month term if false or misleading information is contained in this Application. Applicant agrees to the terms of the "Deposit to Hold Agreement". This Application is preliminary only and does not obligate owner or owner's representatives to execute a lease or deliver possession of the proposed premises.

Photo ID checked Yes No

Applicant/Guarantor Signature Date Representative of Management Date

