## APPLICATION FOR RESIDENCY PLEASE FILL OUT COMPLETELY - THANK YOU

Please Tell Us about Yourself  Last First Middle Maiden  Maiden	Date of Birth Social Se	curity #	Driver's License #
Applicant	Date of Birth	sunty #	Biver 3 Election #
Marital Present 9:00 to 5:00 Status Phone No. ( ) CONTACT PHONE NO.: ( ) Ext.			
Have you ever had an eviction Yes No filed against you?	PETS (Keeping of pets require	es a pet deposit and owner's consent Age	Weight
Present Street # Name Apt. # City State Address	te Zip Rent/Mortgage Pymt	Own 🗆 S	ince / /
Landlord Name Address City State Mtg. Co.	Zip	Phone No. ( )	
Previous Street # Name Apt. # City Sta Address	te Zip Rent/Mortgage Pymt	Own 🗆 S	ince / /
Have you or any occupants ever been arrested for, convicted of, put on probation for, or had adjudication withheld or deferred for a felony offense?  Yes  No			
Please Tell Us about Your Job			
Present Name Business Address City State Phone No. Employer ( )			
Position Supervisor Monthly Income		From /	/ to / /
Previous Name Business Address City	State	Phone No.	`
Employer  Position Supervisor Monthly Income		From /	/ to / /
Please Give Us the Following Information		Discontinu	
Contact		Phone No.	)
Automobile Year Make Model Color Tag # 1st Car	Automobile Year 2 <sup>nd</sup> Car	Make Model	Color Tag #
Children Name Age Name Age Occupying	Name	Age	
Bank Name Location City State			
Applicant represents that all of the statements and representat	ions are true and complete	, and hereby, auth	orizes verification of
information including criminal records may be made. Applicant agrees that false, misleading or misrepresented information may result in the application being rejected, will void a lease/rental agreement if any and/or be grounds for immediate eviction with loss of all deposits and any other penalties as provided by the lease terms if any. Applicant authorizes verification of all information by the Landlord and or Management Company. Applicant has the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation. NON REFUNDABLE APPLICATION FEEApplicant(s) has paid to Landlord and/or Management company herewith the sum of \$ as a NON REFUNDABLE APPLICATION FEE for costs, expenses and fees in processing the application. APARTMENT DEPOSIT AGREEMENTApplicant has deposited an "APARTMENT DEPOSIT" of \$ in consideration for taking the dwelling off the market while the application is being processed. If applicant is approved by Landlord and/or Management and the lease is entered into and possession of the apartment is taken the "APARTMENT DEPOSIT" shall be applied toward the security/damage deposit. If applicant is approved, but fails to enter into the lease within 3 days of verbal and/or written approval and/or take possession after lease signing, the FULL "APARTMENT DEPOSIT" shall be forfeited to the Landlord or Management in addition to any penalties as provided in the lease if the lease has been signed by the applicant. The "APARTMENT DEPOSIT" shall be refunded only if applicant is not approved. Keys will be furnished only after lease and other rental documents have been properly executed by all parties and only after applicable rentals and security deposits have been paid. This application is preliminary only, in no way implies that a particular rental unit shall be available and in no way obligates Landlord or Management to execute a lease or deliver possession of the proposed premises.			
I HAVE READ AND AGREE TO THE PROVISIONS AS STATED	SECURITY DEPOSIT	\$	OFFICE USE ONLY
	PET SECURITY	\$	
	PET FEE	\$	
	CREDIT CHECK FEE	\$	COMMUNITY
Applicant Signature Date	PAID WITH APPLICATION	\$	APT.#
	BALANCE OF DEPOSIT DUE	\$	RENT
	FIRST MONTH'S RENT	\$	APT.TYPE
	TOTAL DUE BEFORE MOVE-IN		TERM OF LEASE
	RECEIVED BY:		MOVE-IN DATE
	APPROVED BY:		CREDIT REPORT
			PHOTO I.D.'d