



APPLICATION FOR RESIDENCY

Apt # _____
Type: Bed ____ Bath ____
Proposed Move-in Date: _____
Lease Term: _____
Rent: \$ _____ Recurring Charges: _____
Security Deposit: \$ _____
Miscellaneous: _____

Applicant Data

Name: _____
 First Middle Last Date of Birth Social Security #
Co-Applicant: _____
 First Middle Last Date of Birth Social Security #
Cell Phone: _____ WorkPhone: _____ Email: _____ Male Female

Please provide the information for one of the items below, check the corresponding choice and attach a photocopy:

Driver's License Passport State ID Number: _____ State: _____ Country: _____

Are you a student? Yes No If yes, what school: _____

20____ Standing: Freshman Sophomore Junior Senior Graduate, Dept. _____ Advisor _____

Pets? Yes No If yes, describe: _____

Other Occupants

(1) _____
 Name Date of Birth Social Security # Relationship

(2) _____
 Name Date of Birth Social Security # Relationship

Rental History

Current Rent/Mortgage: \$ _____

Current Local Address: _____
 Street City State Zip Country

Permanent Address: _____
 Street City State Zip Country

Previous Address: _____
 Street City State Zip Country

Employment History

Present Employer Name Business Address City State Zip Phone #

Position Held Supervisor Name Annual Income Since

Previous Employer Name Business Address City State Zip Phone #

Position Held Supervisor Name Annual Income Since

Credit References

Bank Name _____ Location _____ City/State _____ Account # _____ Phone # _____

Credit Card _____ Location _____ City/State _____ Account # _____ Phone # _____

Have you ever been convicted of a felony? Yes No If yes, reason: _____

Have you ever been evicted from any residence? Yes No If yes, reason: _____

Have you ever filed bankruptcy? Yes No If yes, when: _____

Guarantor

Name: _____
First Middle Last Date of Birth Social Security #

Cell Phone: _____ Work Phone: _____ Email: _____

Guarantor Address: _____
Street City State Zip Country

Have you ever filed bankruptcy? Yes No If yes, when: _____

Emergency Contact

First Middle Last Full Address Telephone

Parking/Vehicle Information

Will you need a parking permit? Yes No

Vehicle Make: _____ Model: _____ License Plate #: _____ Year: _____ Color: _____

I hereby deposit \$ _____ with _____ management as a good faith deposit in connection with this lease application. If my application is accepted I understand this deposit can be applied as follows: \$ _____ toward _____ my refundable security deposit, which is due on the date I execute the lease agreement, and **\$25.00** toward my application fee. If Management accepts my application, I agree to execute the lease agreement within ten (10) days after being notified by Management that the lease has been prepared or on move-in date, whichever is earlier. I acknowledge that my application will be deemed withdrawn and I will not be entitled to possession of the apartment if I fail to so execute and deliver the lease agreement. If for any reason Management decides to decline my application, Management will refund this good faith deposit to me in full, less the application fee. I hereby waive any claim to damages by reason of non-acceptance.

I understand I may cancel this application within seventy-two (72) hours of the date of application and receive a full refund of good faith deposit, less the application fee. If I cancel after seventy-two (72) hours of the application, or fail to execute the rental agreement or refuse to occupy the premises on the agreed upon date, I understand this deposit will be fully forfeited by me for incurred expenses and loss of rent due to my cancellation.

I acknowledge that this application is subject to review and approval of Management and I understand Management has the sole discretion to deny this application bases on qualifying criteria. I authorize Management to verify the information listed on this application and to make any inquires about me of any of the references listed in my application, my employer, and any credit reporting agencies. I certify that all information contained herein is true and correct.

I have read and agree to the provisions as stated.

APPLICANT OR APPLICANTS:

Applicant's Signature Date

Co-Applicant's Signature Date

Management Representative Signature

Date

