

Twin Lakes / Squire Park / Southview / Sitterly Manor Apartments

Phone: (518) 371-1551

Fax: (518) 371-9585

Thank you for your interest in Twin Lakes, Squire Park, Southview and Sitterly Manor Apartment communities. We hope the following information will assist you in your search for a new apartment home.

If you have any questions feel free to call us at any time!

Thanks again and we look forward to having you as a resident!

\*Security Deposit                      Total of one month rent less  
\$250.00 non-refundable deposit

\*Redec Fee                      \$275 (non-refundable/applies to security deposit)

\*Credit Report Fee                      \$30 per person 18 years or older

At Twin Lakes, Squire Park, Southview and Sitterly Manor, we accept cats and dogs in all of our apartment homes.

All of our apartment homes have a two (2) pet maximum.

\* Pet Fee                      \$350 non-refundable pet deposit

\* Pet Rent                      \$25 per month pet fee

Included in rent:

Water/Sewer  
(NYSEG)  
Trash Removal  
Grid)  
Recycling

Resident Pays:

Electricity  
Gas (National  
Telephone  
Cable  
Internet Access

Renters Insurance is a requirement of The Solomon Organization.  
Again, thank you for your interest!!

STATEMENT OF RENTAL POLICY  
FOR  
THE SOLOMON ORGANIZATION

Welcome, and thank you for choosing our community. We require that each applicant and adult occupant meet certain rental criteria. Before you fill out our Rental Application, we suggest that you determine whether you meet our requirements. Please note that the term "Applicant" provided below applies to all Residents to be identified on the Lease Contract and the person or persons to be responsible for paying the rent. Please note that these represent our current rental criteria; nothing contained in these requirements shall constitute a guarantee or representation by Owner prior to these requirements going into effect. Additionally, our liability to verify whether these requirements have been met is limited to the information we receive from the various credit reporting services used.

APPLICATION SCREENING CRITERIA

1. Applicant or applicants must be minimum of eighteen (18) years of age or older.
2. Occupancy Guidelines:

<u>TYPE OF APARMENT</u>	<u>MAXIMUM # OF OCCUPANTS</u>
STUDIO	2
ONE BEDROOM	2
TWO BEDROOM	4
THREE BEDROOM	6

3. A **Non-refundable** application fee of **\$30.00 per adults age 18 and older (money order/personal check only payable to Solomon Apartment Management LLC)** is required, with a \$250.00 non-refundable fee which will be applied towards the cleaning of the apartment. ***If the applicant is approved a lease contract must be signed within five (5) days of approval. In addition, a security deposit of no less than one months rent (based on approval) is also due five (5) day after approval.*** These deposits are payable in a certified check or money order only. This will hold the apartment for up to thirty (30) days. All deposits and fees submitted are non-refundable if applicant(s) does not take the apartment.

4. Employment Requirement:

Employment will be verified. Verifiable income shall include income as confirmed by employer, trust officer, two (2) recent computerized pay stubs, or two (2) years tax returns, if self-employed.

5. Credit History:

Your credit report must reflect a Scorex Rating of 130 or above. If below 130, see Scorex Rating Chart. The Landlord reserves the right to deny your application if the above criteria is not met.

5A Scorex Rating Chart

180 – Above ~ Approved with 1 month security  
130 – 179 ~ Approved with 5% premium  
Below 130 ~ Denial

6. Criminal Convictions:

The Solomon Organization is an avid supporter of Crime Free/Drug Free in Multi-housing. Applicant(s) with a felony criminal convictions or sex offenders offense will be denied.

YOU WILL BE DENIED IF:

You misrepresent any information on the application. In general, if misrepresentations are found after the rental agreement is signed, your rental agreement will be terminated.

**RENTAL AGREEMENT**

If you are accepted, you will be required to sign a Lease Contract in which you will agree to abide by the policies of this rental property. A copy of this contract is available for your review. Please read the Lease Contract carefully, as we take each and every part seriously. It has been written to protect the rights of both our Residents and the Owners of the community.

**FAIR HOUSING STATEMENT**

It is the policy of the Solomon Organization and this rental community to treat all Current and Prospective residents in a fair, professional manner, without regard to race, color, religion, sex, familial status, handicap, or nation origin.

“THIS IS AN EQUAL HOUSING OPPORTUNITY COMMUNITY”

I/WE HAVE READ AND UNDERSTAND THE RENTAL POLICIES OF THIS COMMUNITY.

\_\_\_\_\_  
(Applicant Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Applicant Signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Manager/Leasing Agent Signature)  
Solomon Apartment Management, LLC.

\_\_\_\_\_  
(Date)

AUTHORIZATION TO OBTAIN CONSUMER REPORT

I/we hereby authorize the Solomon Management, LLC, d.b.a Twin Lakes Apartments, to obtain a consumer report, employment verification report, current/previous Landlord reports, and any other information the Solomon Management, LLC deems necessary, for the purpose of evaluating my application for residency at Twin Lakes Apartments. I understand that such information may include, but is not limited to, credit history, civil and criminal information, records of arrest, rental history, employment/salary details, vehicle records, licensing records, and/or any other necessary information. I/we hereby expressly release the Solomon Organization, and any procurer of furnisher of information, from any liability what-so-ever in the use, procurement or furnishing of such information, and understand that my application information may be provided to various local, state, and/or federal government agencies, including without limitation, various law enforcement agencies.

\_\_\_\_\_  
(Applicant Signature) (Date)

\_\_\_\_\_  
(Applicant Signature) (Date)

On this date, **non-refundable** application fees of \$30.00 were received by the undersigned.

\_\_\_\_\_  
(Manager/Leasing Agent) (Date)  
Solomon Apartment Management, LLC.

PRE-LEASING AGREEMENT / HOLDING DEPOSIT  
FOR  
TWIN LAKES/ SQUIRE PARK / SOUTHVIEW / SITTERLY MANOR  
APARTMENTS

I / we, \_\_\_\_\_,

\_\_\_\_\_  
(Applicant One)

\_\_\_\_\_  
(Applicant Two)

Hereby agree to pay the fee of \$250.00 for the community to remove apartment number \_\_\_\_\_ from the Apartment Availability List. I / we understand that the above paid fee will be converted and applied towards the required non-refundable cleaning fee upon executing my/our lease contract to the above mentioned apartment. I / we understand that the fee of \$250.00 is refundable only if I / we cancel my/our application, in writing within 48 hours after submitting the rental application. (Fee is also refundable if management declines the application.)

\_\_\_\_\_  
(Signature of Applicant One)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Printed Name – Applicant One)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of Applicant Two)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Printed Name – Applicant Two)

\_\_\_\_\_  
(Date)

On this date, *the holding fee*, of \$250.00 was received by the undersigned.

\_\_\_\_\_  
(Manager/Leasing Agent)

\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Date)

## **Solomon Apartment Management L.L.C. Pet Policy**

There are over 400 dog breeds currently recorded throughout the world recognized by the American Kennel Club (AKC). For participation in The Solomon Organization's pet policy, you must comply with the following breeds allowed on the property.

### **Allowed pets**

The following dog breeds are **NOT** allowed. No full or mix of:

Rottweiler	Staffordshire Terrier/Pitbull
Doberman	Dalmatian
Beagle	Akita
Chow	Husky
German Shepherd	

Or any breed that management deems to have vicious characteristics.

Cats must be indoors only and only domestic breeds are allowed.

Maximum pets per apartment:

One dog; OR one dog and one cat; OR two cats; OR two dogs

If a resident has two dogs which exceed 180 lbs. combined weight, they will be asked to reside in a first floor apartment.\*

### **Standard Fees & Deposits**

There will be a \$25 pet fee per month for a pet.

A new pet fee may be determined with each and every renewal term or lease extension

Pet fees will continue to be charged until you notify us in writing that the pet is no longer in the residence. A pet inspection may be required at this time.

In return for our permission to keep a pet(s) in your apartment you will be asked to pay a non-refundable fee to us of \$350.

\*Dogs that exceed 35 lbs are permitted in certain locations. Please inquire for details.

**Initial Pet Requirements**

In order to apply for permission to keep a pet, you must provide the following:

Cats: Documentation confirming the pet has been neutered or spayed, and vaccinated against feline leukemia, rabies and distemper

Dogs: Documentation confirming the pet has been neutered or spayed, breed age and weight, vaccinated against rabies and distemper

Both: Photo of pet. Proof of renter’s insurance policy

**Guide Dogs or Assistance Animals for the disabled**

Guide dogs or other Assistance Animals for disabled residents will always be permitted with the verification that the resident qualifies as disabled and requires the animal to have equal opportunity use and enjoy the apartment and community. A pet agreement will be required; however, all fees and renters insurance requirements will be waived. The pet policy (including the dog breed restrictions set forth above) and the pet rules and regulations will apply to the Assistance Animal.

**Changes in Pet Policy**

We may change any term or condition of the above pet policy after thirty (30) days notice to residents who signed pet agreements; however, if such change in the pet policy means we will no longer allow your pet, then the pet will be permitted (grandfathered) until the expiration of your then-current lease term.

\_\_\_\_\_  
Resident Signature

Date

\_\_\_\_\_  
Resident Signature

Date

\_\_\_\_\_  
Solomon Apartment Management

Date



**Twin Lakes/Squire Park/South View**

Phone: (518) 371-1551

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**This must be filled out completely for occupancy**

Today : \_\_\_\_\_ Desired Date of Occupancy: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Applicant #1 \_\_\_\_\_ Social Security # \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Date of Birth: \_\_\_\_\_

\_\_\_\_\_ I-9 Work Visa \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Applicant #2 \_\_\_\_\_ Social Security # \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Date of Birth: \_\_\_\_\_

\_\_\_\_\_ I-9 Work Visa \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

List Names, Social Security Numbers, and Date Of Birth for all people who will occupy apartment:

Name: \_\_\_\_\_ Relationship \_\_\_\_\_ Social Security # \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Date of Birth: \_\_\_\_\_

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Are all applicants and/or occupants citizens or legal residents of the United States?  Yes  No

Will a pet of any type live in the apartment:  Yes  No If yes, please describe below:

(Note: No Monthly Fees for Service Animals)

Type \_\_\_\_\_ Name \_\_\_\_\_ Weight \_\_\_\_\_ Height \_\_\_\_\_ Spayed/Neutered \_\_\_\_\_ Licensed/Date \_\_\_\_\_

\_\_\_\_\_

Do you have a water bed?  Yes  No Do you have renter's insurance?  Yes  No

**Residential History**

Please provide the following information

1 Current Address: \_\_\_\_\_

Apt #: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Landlord/Community Name: \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_\_ Rent Amount: \$ \_\_\_\_\_

Date Rented: From: \_\_\_\_\_ To: \_\_\_\_\_

**Alternative Address:** (such as P.O. Box #, etc) **If None, Write "Same as Above"** \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

2 Previous Landlord/Community Name: \_\_\_\_\_

Address: \_\_\_\_\_ Apt.# \_\_\_\_\_ City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: (\_\_\_\_) \_\_\_\_\_ Rent Amount: \$ \_\_\_\_\_

Date Rented: From: \_\_\_\_\_ To: \_\_\_\_\_

Person to notify in Case of an Emergency:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

Have you and/ or any occupants ever been evicted?  Yes  No

Have you and/ or any occupants ever declared bankruptcy?  Yes  No

Do you and/ or any occupants use illegal drugs?  Yes  No

Have you or any member or your family been convicted of a crime or are currently engaged in any criminal activity? If you answer as YES, explain.  Yes  No

Yes  No

If yes, Please explain: \_\_\_\_\_

**Employment Information**

Current Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Position \_\_\_\_\_ How Long \_\_\_\_\_ Gross (Hr, Wkly, Bi-wkly, Annual) Income: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

*For office use only:*  
Verified By: \_\_\_\_\_ Who Verified By: \_\_\_\_\_  
Date: \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Position \_\_\_\_\_ How Long \_\_\_\_\_ Gross Monthly Income: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

*For office use only:*  
Verified By: \_\_\_\_\_ Who Verified By: \_\_\_\_\_  
Date: \_\_\_\_\_

Applicant #2: \_\_\_\_\_ Address: \_\_\_\_\_

Position \_\_\_\_\_ How Long \_\_\_\_\_ Gross (Hr, Wkly, Bi-Wkly, Annual) Income: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

*For office use only:*  
Verified By: \_\_\_\_\_ Who Verified By: \_\_\_\_\_  
Date: \_\_\_\_\_

Other source of income: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

Applicant's Bank: \_\_\_\_\_ Branch: \_\_\_\_\_

Checking Account? YES NO Savings Account? YES NO

Applicant #1 Driver's License Number: \_\_\_\_\_ State \_\_\_\_\_ Expiration \_\_\_\_\_

Applicant #2 Driver's License Number: \_\_\_\_\_ State \_\_\_\_\_ Expiration \_\_\_\_\_

Vehicle you would like to park on property:

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ License Plate Number: \_\_\_\_\_ State: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Twin Lakes, Squire Park, Southview as owner reserves the right to reject this application and to refuse possession of the above mentioned accommodations I/We have read the foregoing and certify that the information herein submitted by me/us is true and correct, that this application in my/our behalf, subject to the above, applicant(s) authorize Twin Lakes, or its agents to process this application and make the necessary searches and investigations. The application fee is non-refundable.

**\*APPLICANTS ACKNOWLEDGE THAT WINDOW AIR CONDITIONING UNITS ARE NOT ALLOWED.\***

**DOGS ARE PERMITTED WITH WEIGHT AND BREED RESTRICTIONS.**

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant #2 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

How did you find out about us? Rent.net \_\_\_\_\_ Apt Guide: \_\_\_\_\_ Drive By/Signage: \_\_\_\_\_  
Apartment Finder \_\_\_\_\_  
Apt Shopper Guide \_\_\_\_\_ Rent.com \_\_\_\_\_ Internet: \_\_\_\_\_  
Intelligencer \_\_\_\_\_ Resident Referral (Name): \_\_\_\_\_  
Craigslist \_\_\_\_\_ Referral Other: \_\_\_\_\_  
Solomonorg.com \_\_\_\_\_ Other: \_\_\_\_\_

UNIT TYPE: \_\_\_\_\_ OCCUPANCY DATE: \_\_\_\_\_ RENTAL AMOUNT: \_\_\_\_\_

Leasing Agent: \_\_\_\_\_ Date Application Received: \_\_\_\_\_