

Park House Apartments
7947 Mentor Ave, Mentor, OH 44060

APPLICATION FOR RESIDENCY

Applicant's Full Name: _____ Soc. Sec. # _____

Date of Birth: _____ Driver's License # _____ State: _____ or State Id# _____ State: _____

Current Address: _____ Apt. No. _____

City: _____ State: _____ Zip Code: _____

Current Home Phone Number: () _____ Work # () _____ Ext. _____

Cell Phone No: () _____ E-Mail _____ Check preferred method of Contact

Do you own/rent at this address: _____ Current Rent/Mortgage: \$ _____ Dates of Residency: _____ to _____

Name of Apartment Building and/or Landlord: _____

Landlord Phone Number: () _____ Fax No. () _____ Reason for Moving: _____

Previous Address: _____ City/State/Zip: _____

Previous Landlord Name: _____ Phone No. () _____ Fax: () _____

EMPLOYMENT AND INCOME

Current Employer: _____ Position: _____ Dates of Employment: _____ to _____

Address: _____ City/State/Zip: _____

Work Phone No. () _____ Fax No. () _____ Gross Monthly Income: \$ _____

Previous Employer: _____ Position: _____ Dates of Employment: _____ to _____

Address: _____ City/State/Zip: _____

Work Phone No. () _____ Fax No. () _____ Gross Monthly Income: \$ _____

Have you ever been sued, garnished, evicted or filed bankruptcy? _____

Have you or any person who will reside with you in the apartment ever been convicted of a felony? _____

If yes, please provide date and place of conviction, nature of offense, sentence and dates of incarceration if any on the back of this application. _____

Have you or any person who will reside with you in the apartment ever been convicted of or pled guilty to a "sexually-oriented offense" or been required to register with a designated law enforcement official pursuant to Ohio Revised Code 2950.01 et. seq., or been determined to be a "sexual predator" or a "sexually-oriented offender" with the meaning of Ohio Revised Code 2950.01 et. seq.?

_____ Yes _____ No

OCCUPANCY

Name/Date of Birth/Social Security# only required for occupants over the age of 18

Total of persons to occupy the suite over the age of 18 _____

Name: _____ Date of Birth: _____ Social Security # _____
Name: _____ Date of Birth: _____ Social Security # _____

Total of persons to occupy the suite under the age of 18 _____

VEHICLE INFORMATION

Auto Make: _____ Year: _____ Model: _____ Color: _____ Plate #: _____ State: _____

Auto Make: _____ Year: _____ Model: _____ Color: _____ Plate #: _____ State: _____

PET INFORMATION (you must first verify with rental office that your pet will me all required criteria for weight, height, breed. All vet papers, photos & fees must be supplied before move-in. All pets must be spayed and neutered prior to move-in).

Kind of Pet: _____ Breed: _____ Weight: _____ Age: _____ Name: _____

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EMERGENCY CONTACT INFORMATION In an emergency, notify:

Name: _____ Phone No: () _____

Address: _____ City/State/Zip Code: _____

Work Phone No: () _____ Relationship: _____

If you become seriously ill or die, you authorize the person listed above to enter your dwelling to remove and store all contents, as well as your property in the mailbox, storerooms and common areas.

I certify that the items in this application are true and complete to the best of my knowledge. I hereby provide authorization to (Park House Apartments), its agents, employees and/or attorneys to obtain and/or verify my employment, criminal and credit history reports in connection with this application and in connection with any decision to renew my tenancy and lease. I further understand that the information obtained pursuant to this application will be relied upon for ninety (90) days following the receipt of the information by (Park House Apartments). If I have not taken possession of the apartment within said 90-day period, I authorize (Park House Apartments), its agents, and employees to obtain and /or verify my employment, criminal background, and credit history again and to obtain updated criminal background and credit reports in connection with this application. I further understand that I may be required to pay an additional fee in the event it becomes necessary due to such time lapse for (Park House Apartments) to request such information and to obtain such reports. I further authorize (Park House Apartments), its agents, employees and/or attorneys to obtain credit reports, criminal background and information at any time during and after my tenancy, in the event of a breach of any lease or term of tenancy.

A hold deposit of \$ _____ is due at time of application. This fee goes towards security deposit or rent upon move-in. If this application is approved and a lease is executed, then upon occupancy, \$ _____ fee shall be applied toward the Security Deposit or Rent.

Applicant acknowledges that this application is a contractual agreement to rent the above-stated suite from Landlord. Applicant agrees as follows: If approved by Landlord, the applicant will be required to sign a lease and take occupancy of the suite for the period of time indicated on this application. Applicant's deposit will be applied as shown above and shall not bear interest. If applicant does not sign a lease and take occupancy of the suite, the full deposit will be retained by the Landlord as liquidated damages suffered by reason of applicant's refusal to abide by this Agreement. Applicant may cancel this Agreement by the end of the first business day following the date of application. If Landlord rejects this application, or if applicant cancels this agreement within the specified time, that portion of the deposit applied towards the rent security deposit will be returned to applicant within

thirty (30) days of the application date; however, that portion applied as an administrative fee, in the sum of Thirty Dollars and 00/100 dollars (\$30.00), shall be non-refundable and shall be used by Landlord to cover (a) verification of residency, (b) verification of employment, (c) credit and criminal checks, and (d) other administrative expenses. Applicant agrees to transfer both electric and gas services into their name no later than the initial date of occupancy.

I have read this application and hereby state that the information supplied by me is complete and accurate and I agree that, in the event that this information is not complete and accurate, (Park House Apartments) may cancel this application and have no further obligation to lease. I also agree that this application will be affixed and become part of the Lease Agreement entered into with (Park House Apartments)

ALL APPLICANTS ARE SUBJECT TO THE OWNER'S APPROVAL. IT IS THE POLICY OF THE LANDLORD TO ACCEPT, PROCESS, AND SELECT APPLICATIONS WITHOUT REGARD TO RACE, COLOR, SEX, RELIGION, HANDICAP, FAMILIAL STATUS, CLASSES OF ANCESTRY, MILITARY STATUS OR NATURAL ORIGIN.

Applicant(s) Signature

Print Name

Date

Signature of Leasing Agent Accepting Application

Date