

Rental Application

Applicant's Name: _____

Other Names Used: _____

Email Address: _____

D.L. # and State: _____

Social Security # : _____

Birthdate: _____ Sex _____

Marital Status: Single _____ Married _____ Divorced _____ Separated _____

Phone Number: Cell _____ Home _____

Current Address:

Street Name _____ APT ____ OR HOUSE ____

City _____ Monthly Rent _____

State _____ Date Moved In _____

Zip Code _____

Reason for moving: _____

Apt. Community Name: _____

Manager's Name _____

Apt. Community Phone # _____

Previous Address (If less than 2 years at Current Address)

Street Name _____ APT ____ OR HOUSE ____

City _____ Monthly Rent _____

State _____ Date Moved In _____

Zip Code _____ Date Moved Out _____

Reason for moving: _____

Apt. Community Name: _____

Manager's Name _____

Apt. Community Phone # _____

Current Employment:

Employer: _____

Employer Address _____

Employer Phone # _____ Fax # _____

Supervisor's Name _____ Your Position _____

Date Started _____ Date Ended _____

Gross Pay (before deductions) _____ Full Time ____ Part Time ____ Temp. ____ Military ____

Previous Employment (If less than 2 years at Current Employment)

Employer: _____

Employer Address _____

Employer Phone # _____ Fax # _____

Supervisor's Name _____ Your Position _____

Date Started _____ Date Ended _____

Gross Pay (before deductions) _____ Full Time ____ Part Time ____ Temp. ____ Military ____

Spouses Name: _____
 Other Names Used: _____
 Email Address: _____
 D.L. # and State: _____
 Social Security # : _____
 Birthdate: _____ Sex _____

Current Employment:

Employer: _____
 Employer Address _____
 Employer Phone # _____ Fax # _____
 Supervisor's Name _____ Your Position _____
 Date Started _____ Date Ended _____
 Gross Pay (before deductions) _____ Full Time ___ Part Time ___ Temp. ___ Military ___

Previous Employment (If less than 2 years at Current Employment)

Position: _____
 Employer: _____
 Employer Address _____
 Employer Phone # _____ Fax # _____
 Supervisor's Name _____
 Date Started _____ Date Ended _____
 Gross Pay (before deductions) _____ Full Time ___ Part Time ___ Temp. ___ Military ___

All Other Minor Occupants (Any adult occupants need to complete a separate application form unless spouse)

Name	_____	Relationship	_____
Birthday	_____	Sex	_____ Male _____ Female
Name	_____	Relationship	_____
Birthday	_____	Sex	_____ Male _____ Female
Name	_____	Relationship	_____
Birthday	_____	Sex	_____ Male _____ Female

Your Vehicles (List all vehicles that will be parked by your, your spouse or any other occupants. Include cars, trucks, motorcycles, trailers etc.

Make _____	Model _____	Year _____	State _____	License Plate # _____
Make _____	Model _____	Year _____	State _____	License Plate # _____
Make _____	Model _____	Year _____	State _____	License Plate # _____
Make _____	Model _____	Year _____	State _____	License Plate # _____

Pets: Will you or any other occupant have an animal? YES _____ NO _____

Animal's Name	_____	Breed	_____
Weight _____	Age: _____	Date Last Vaccinated	_____
Animal's Name	_____	Breed	_____
Weight _____	Age: _____	Date Last Vaccinated	_____
Name Of Veterinarian:	_____		

Application Agreement

1. **Lease Contract Information.** The Lease Contract contemplated by the parties is described above. The Lease Contract along with Special Provisions and Lease Addendums must be signed by all parties prior to move in.
2. **Application, Administrative & Pet Fee (non-refundable).** You have delivered to our representative an application fee in the amount indicated, and this payment partially defrays the cost of administration paperwork. The pet fee shall be returned if required as a matter of law. It is non-refundable.
3. **Approval.** When we approve the Application, our representative will notify you (or one of you if there are co-applicants) of the approval and deposit the required security deposit in the escrow account. If you or any co-applicant fails to take occupancy or decides to withdraw your application after approved, we will retain the security deposit as liquidated damages.
4. **Completed Application.** An Application will not be considered "completed" and will not be processed until all of the following have been provided to us: an Application, fully filled out and signed by you and each co-applicant; application fees, paid to us; an administrative fee, paid to us; paycheck stubs provided to us, or bank statements and tax returns per the published Rental Qualifications". If the application is not completed within forty-eight (48) hours of initial application, the application will not be approved and the deposit will be refunded. The application fee and administrative fee is not refundable.
5. **Non-approval in Seven Days.** We will notify you whether you have been approved within seven days after the date we receive a completed Application. Your application will be considered "disapproved" if we fail to notify you of your approval within seven days after we have received a completed Application. Notification may be in person or by mail or telephone unless you have requested that notification be by mail. You must not assume approval until you receive actual notice of approval.
6. **Refund after Non-approval.** If you or any co-applicant is disapproved or deemed disapproved, we will refund the security deposits within 7 days of such disapproval. Refund checks may be made payable to all co-applicants and mailed to one applicant.
7. **Notice to or from co-applicants.** Any notice we give you or your co-applicant, and any notice from you or your co-applicant is considered notice from all co-applicants.
8. **Keys or Access Cards.** We will furnish keys and/or access cards only after all parties have signed rental documents, all applicable rents, security deposits have been paid in full and required utilities are turned on in tenant's name.
9. **Receipt:** Application fee (non-refundable): \$_____ Administrative Fee (non-refundable): \$_____ Security Deposit (refundable if applicant is not approved.) \$_____ Total amount of money received to date: \$_____
10. **Signature.** Our representative's signature is consent only to the above application agreement. It does not bind us to accept applicant or to sign the proposed Lease Contract.
11. **Criminal Background Check.** A criminal background check will be run on the applicant. The applicant will be advised of the results. Consideration of a criminal conviction will be one of the factors in determining whether or not the applicant will be granted or denied a lease. The Landlord shall abide by all laws, rules and regulations of the Federal and State Fair Housing Laws and other applicable laws as well as its internal policy in making a determination for applicant's right of occupancy.
12. In the event any information you have provided above has changed since the date of submission of this Application prior to a decision on your potential Lease Contract, you are required to make all necessary revisions, amendments or changes to most accurately reflect your Application. The failure to do so may, at Landlord's option, form the basis to disallow your Application or will be considered a breach of the lease placing you in default if a lease is in place.
13. Should any false, misleading or intentionally inaccurate information be provided in the application Landlord may, at its option, disallow your application or place you in default in your Lease Contract if a lease is in place.
14. This Application and all information contained herein shall be a part of any Lease Contract you enter into.

Acknowledgement. You declare that all your statements on this Application are true and complete. You authorize us to verify same through any means including consumer reporting agencies and other rental housing owners. If you fail to answer any question or give false information, we may reject the application, retain all application and administrative fees as liquidated damages for our time and expense, and terminate any potential or actual right of occupancy. Giving false information is a serious offense. In lawsuits relating to the application or Lease Contract, the prevailing party may recover all attorneys' fees and litigation costs from the losing party. We may at any time furnish information to consumer reporting agencies and other rental housing owners regarding your performance of your legal obligations including both favorable and unfavorable information about your compliance with the Lease Contract, the rules, and financial obligations. You acknowledge that should any false, misleading or intentionally inaccurate information provided in this process grants Landlord the right to complete your Application or if completed and accepted to terminate all lease rights and occupancy rights.

Emergency Information: Please list emergency contact person over 18, who will not be living with you.

Name _____ Relationship _____

Address _____

Work Phone: _____ Home Phone: _____ Cell Phone: _____

If you are seriously ill, missing, or in a jail or penitentiary according to an affidavit of the above person, or if you die, you authorize (check one or more): ___ The above person ___ Your Spouse, and/or ___ Your parent or child to enter your dwelling to remove all contents, as well as your property in the mailbox, storerooms and common areas. **IF NO BOX IS CHECKED, ANY OF THE ABOVE IS AUTHORIZED AT OUR OPTION.** If you are seriously ill or injured, you authorize us to send for an Ambulance at your expense. We are not legally obligated to do so.

This Rental Application and the Lease Contract are binding legal documents when signed. Please read them carefully. Before submitting a Rental Application or signing a Lease Contract, you may take a copy of these documents to review. You are entitled to a copy of the Lease Contract after it is fully signed.

Applicant's Signature: _____ Date: _____

Applicant's Signature: _____ Date: _____

Applicant's Signature: _____ Date: _____

Applicant's Signature: _____ Date: _____

Signature of Owner's Representative: _____ Date: _____

This Application and all information contained herein shall be a part of your Lease Contract if occupancy rights are granted to you by Landlord.

FOR OFFICE USE ONLY

1. **Person accepting application:** _____ **Phone:** (____) _____

2. **Person processing application:** _____ **Phone:** (____) _____

3. **Date and method by which applicant or co-applicant was notified by telephone, letter, or in person, of**

4. **acceptance or non-acceptance:** _____

5. **Name of person(s) who were notified (at least one applicant must be notified if multiple applicants):**

6. **Name of owner's representative who notified above person(s):**



WE DO BUSINESS IN ACCORDANCE WITH THE FEDERAL FAIR HOUSING LAW



Rental Verification

The following person(s) has/have applied for residency at _____. Part of our application process requires us to verify current and previous rental history. Please complete the form below and fax back to our office at _____. Thank you for your cooperation.

Permission by: _____ Date: _____

Apartment Community: _____
Name: _____ **Is anyone else on the lease?** Yes No
If "yes", please list their names:
Name: _____ Name: _____
Time period lessee(s) have rented with you: From _____ to _____

Monthly Rent: \$ _____ **Any late payments?** Yes No **How many?** _____
Any NSF checks? Yes No **How many?** _____
Any noise, trash, or other nuisance complaints? Yes No
If yes, nature of complaint: _____

Is/are there pet(s) in the apartment? Yes No **Is yes, what type?** _____
Have you received proper notice? Yes No **Is lease being broken?** Yes No
Any damages to the apartment or home? Yes No
If yes, nature and amount of damage: _____ Amount: \$ _____
Is this resident under eviction? Yes No
Have you ever filed eviction proceedings against this resident? Yes No
If yes, for what reason? _____

Will security deposit be refunded? Yes No
Would you rent to this resident again? Yes No **If no, why?** _____

Name and title of person completing this form

Date

Apartments Resident Qualifications

Equal Housing: This community does not discriminate on the basis of race, color, age, sex, religion, handicap, familial status, sexual orientation or national origin.

Identification: All visitors must present a current photo ID issued by a state or government authority (i.e. State Issued Driver's License, State Issued Photo Identification Card, current Passport, current United States Military ID card, or VISA issued by US Immigration and Naturalization Services) A copy of all applicants photo IDs will be made and retained at time of application.

Occupancy Limits - Number of occupants per apartment shall not exceed:

- SRO Unit - 1 person
- 1 Bedroom – 2 persons
- 2 Bedrooms – 4 persons
- 3 Bedrooms – 6 persons
- 4 Bedrooms – 8 persons

Application for Residency: An Application for Residency must be completed and maintained for each applicant 18 years or older who will be living in the apartment and/or contributing to the payment of rent.

Rental History: Up to 24 months of rental history may be verified on present and previous residency and / or mortgage history. A positive record of prompt monthly payment, sufficient notice, with no damages is expected. Eviction, Skip, or Money Left Owing to a Landlord within seven (7) years of application date or falsification of this application may result in an automatic rejection. In addition the resident must have no resident problem issues with current or prior landlord. If an eviction was filed, your application is automatically declined.

Credit History: An unsatisfactory credit report can disqualify an applicant from renting an apartment home at this community. An unsatisfactory credit report is one which reflects past or current bad debts, late payments or unpaid bills, liens, judgments or bankruptcies. **Employment / Income:** Applicants must have a verifiable income source. Acceptable income verification required may include (a.) Income statements (i.e. pay stubs) must be consecutive and current a 6 week period prior to the application or a bank statement showing recurring pay deposits for 12 months. (b.) Proof of income verified by employer on company letter head. This will be called on and verbally verified by the onsite staff. (c.) Job opportunity letter on company letterhead. This will be called on and verbally verified by the on-site staff. (d.) In the event of self-employment, applicant(s) must provide proof of income via the last year's tax return or an accountant's certification of income.

If applicant(s) has no current employment, one or more of the following conditions must be met: (a.) Applicant(s) must provide bank statement reflecting balance equivalent to rental obligation for entire lease term (b.) Proof of Trust Income, or (c.) Proof of Social Security, Retirement, Unemployment or Disability Income.

Your Gross Monthly Income must be _____ times the monthly rental amount. (to include a \$100.00 monthly variance). If unemployed, you must show proof of unearned income that meets required gross monthly income ratio. If self-employed, applicant must provide copies of immediate past (2) years IRS tax returns and current bank statement that supports income stated. If child support and/or alimony are to be considered as income to qualify, applicant must provide proof that child support has been received for the past six months and a copy of the court order to verify monthly amount awarded.

Lease Guarantors: A Lease Guarantor and/or Additional Security Deposit may be required upon evaluation of rental application(s). Lease guarantors may be accepted for students only, for income verification purposes only and must reside in the USA. Guarantor must qualify based not only on the proposed rent amount for the applicant's apartment, but the combination of the proposed rent plus their own housing obligation.

Non US or US Citizens without a SSN or ITIN: **Non US or US Citizens without a SSN or ITIN:** Applicant must provide a valid Passport and must include **at least one (1)** appropriate U.S. Citizenship and Immigration Services (USCIS) document, as specified below.

U.S. Citizenship and Immigration Services (USCIS) documents (must be a valid unexpired document) as follows:

Certificate of Naturalization, Certificate of Citizenship, I-551 Stamp contained in valid foreign passport, I-94 card contained in valid foreign passport, Alien Registration Receipt card (Resident Alien Card), Temporary Resident card, Employment Authorization card,

Refugee Travel document, Foreign students with an F1 Visa status must show USCIS document I-20 and verification of current enrollment in a US school.

Applicant must pay one (1) month additional deposit equivalent to one (1) month "market" rent. If applicant is referred by a government agency they will only have to pay the standard deposit. Property must also obtain proof of income.

Criminal Background Check: A criminal background check will be run on all Applicants. The Applicant will be advised of the results. A full review and analysis of a criminal conviction will be one of the factors in determining whether or not the Applicant will be granted or denied a lease. The Lessor shall abide by all laws, rules and regulations of the Federal and State Fair Housing Laws and other applicable laws as well as its internal policy in making a determination for Applicant's right of occupancy.

Vehicle Parking – All vehicles must have current licenses and inspection stickers as required by Louisiana or Mississippi Law. No unlicensed or inoperable vehicles allowed on the property. Each apartment is allowed ____ automobiles and must be owned by resident. No boat, RV, trailer or commercial truck (more than 2 axles) storage allowed on the premises.

Pet Approval (if pets are allowed) – No pets are allowed without management's prior written approval and payment of pet deposit and fee for each pet. There is a limit of no more than __ pets allowed per apartment. Full-grown weight limits not to exceed _____ lbs and must meet all other Pet Requirements for approval.

Fees Owed to Process Application – Non-refundable application fee and administrative fee (if applicable) plus the security deposit must be paid with application in order to process for occupancy. Upon move in, a copy of all occupants 18 years or order's valid driver's license or sate identification card will be made for your permanent file.

Notification: Applicants will be informed of the status of their application by telephone within five (5) business days (Mon – Fri) from submitting the application and the required processing fee. If the applicant is rejected, the applicant will be given an adverse action letter with information to contact **Rent Grow dba Yardi Resident Screening** to request copies of the information used to determine eligibility for occupancy. Management cannot be held responsible for inaccuracies contained in any information obtained, and is not allowed to provide details to the applicant regarding said information.

Disclaimer: All prospective residents are screened to meet the above qualifications based on information supplied by sources deemed to be reliable. There may be occasions wherein limited information is available or supplied for screening and events may have occurred since the application was obtained. We, therefore, do not warrant representation that these qualifications are absolute for all existing residents. Management also reserves the right to offer residency to Corporate Companies. Corporate companies may utilize an independent screening process in qualifying their occupants.

Lessee

Lessee

Date:

Date:

Lessor / Agent for Owner

***If applying for residency via fax and / or mail a copy of a federally issued picture ID is required and all applications must be notarized.**





SECURITY DEPOSIT AGREEMENT

Date: _____

Received from _____, \$ _____ as a Security Deposit for Unit # _____ of the _____ Apartments. Lessee is aware that if their application is not approved, the security deposit will be refunded and Lessee will not be allowed to occupy the apartments. If the application is approved, this deposit will hold the above referenced unit for the Lessee. If Lessee decided not to move in, the security deposit will be forfeited.

Lessor agrees that, subject to the conditions listed below, this Security Deposit will be returned in full.

The undersigned Lessee agrees that this Security Deposit may not be applied as rent, and that the full month's rent will be paid the first day of each month, including the last month of occupancy.

AGENT FOR LESSOR

LESSEE

LESSEE

RELEASE OF THE SECURITY DEPOSIT IS SUBJECT TO THE FOLLOWING PROVISIONS:

1. Full term of Lease has expired.
2. Thirty days written notice was given prior to leaving the apartment.
3. No damage to property beyond fair wear and tear.
4. Entire apartment, including range, exhaust fan, refrigerator, bathrooms, closets and cabinets are clean.
5. All burned out light bulbs are to be replaced.
6. No damage to carpet beyond normal wear and tear. Carpet must be professionally steam cleaned by resident upon moveout.
7. All unpaid charges are current, to include late charges, delinquent rent and maintenance invoice.
8. All keys are returned.
9. All debris, rubbish and discards are removed from the unit and placed in appropriate containers.
10. Forwarding address left with manager.
11. All terms of the lease are complied with.

The costs of labor and materials for cleaning and repairs and delinquent payments will be deducted from Security Deposit if all above provisions are not complied with. The Security Deposit will be refunded by check, mailed to the forwarding address, made payable to all persons signing the lease. Refunds cannot be picked up at the office.



TENANT RELEASE AND CONSENT

I/We _____, the undersigned hereby authorize all persons or companies in the categories listed below to release without liability, information regarding employment, income and/or assets to _____ APARTMENTS for the purposes of verifying information on my/our apartment rental application.

INFORMATION COVERED

I/We understand that previous or current information regarding me/us may be needed. Verifications and inquiries that may be requested include, but are not limited to: personal identity, student status, employment, income, assets, and medical or child care allowances. I/We understand that this authorization cannot be used to obtain any information about me/us that is not pertinent to my/our eligibility for and continued participation as a Qualified Tenant.

GROUPS OR INDIVIDUALS THAT MAY BE ASKED

The groups or individuals that may be asked to release the above information include, but are not limited to:

- | | | |
|--|--|----------------------------------|
| Past and Present Employers | Welfare Agencies | Veterans Administration |
| Support and Alimony Providers | State Unemployment Agencies | Retirement Systems |
| Educational Institutions | Social Security Administration | Medical and Child Care Providers |
| Banks and other Financial Institutions | Previous Landlords (including Public Housing Agencies) | |

CONDITIONS

I/We agree that a photocopy of this authorization may be used for the purposes stated above. The original of this authorization is on file and will stay in effect for a year and one month from the date signed. I/We understand I/we have a right to review this file and correct any information that is incorrect.

SIGNATURES

Applicant/Resident (Print Name) Date

Applicant/Resident (Print Name) Date

Applicant/Resident (Print Name) Date

Applicant/Resident (Print Name) Date



EMPLOYMENT VERIFICATION

THIS SECTION TO BE COMPLETED BY MANAGEMENT AND EXECUTED BY TENANT

TO: (Name & address of employer) Date: _____

RE: _____
Applicant/Tenant Name Social Security Number Unit # (if assigned)

I hereby authorize release of my employment information.

Signature of Applicant/Tenant Date

The individual named directly above is an applicant/tenant of a housing program that requires verification of income. The information provided will remain confidential to satisfaction of that stated purpose only. Your prompt response is crucial and greatly appreciated.

Project Owner/Management Agent



Return Form To:

THIS SECTION TO BE COMPLETED BY EMPLOYER

Employee Name: _____ Job Title: _____

Presently Employed: Yes ___ Date First Employed _____ No ___ Last Day of Employment _____

Current Wages/Salary: \$ _____ (circle one) hourly weekly bi-weekly semi-monthly monthly yearly other _____

Average # of regular hours per week: _____ Year-to-date earnings: \$ _____ through ___/___/___

Overtime Rate: \$ _____ per hour Average # of overtime hours per week: _____

Shift Differential Rate: \$ _____ per hour Average # of shift differential hours per week: _____

Commissions, bonuses, tips, other: \$ _____ (circle one) hourly weekly bi-weekly semi-monthly monthly yearly other _____

List any anticipated change in the employee's rate of pay within the next 12 months: _____; Effective date: _____

Additional remarks: _____

Employer's Signature Employer's Printed Name Date

Employer [Company] Name and Address

Phone # Fax # E-mail