

STOUT MANAGEMENT PROPERTY
BOCA RATON LUXURY CONDOMINIUMS
GENERAL RENTAL AND OCCUPANCY CRITERIA GUIDELINES

Credit Approval Criteria

**ALL APPLICANTS WILL BE APPROVED ON THE FOLLOWING CRITERIA:
A RENTAL APPLICATION MUST BE PROCESSED ON ALL PROSPECTIVE RESIDENTS 18
YEARS OF AGE OR OLDER AND A NON-REFUNDABLE APPLICATION FEE PAID FOR
EACH APPLICANT.**

1. **INCOME:** Gross income per apartment must be 3 times the amount of the monthly rent. If not verifiable by employer, we require a copy of the previous year's tax return/W-2 or the past one month of paycheck stubs or bank statements.
2. **EMPLOYMENT:** A prospect must have verifiable current employment and twenty-four months employment history or a verifiable source of income. Any applicant unable to meet this criterion may be accepted as a resident provided that their anticipated residency term is paid up front.
3. **CREDIT:** A credit report will be processed on each applicant. All applicants will be evaluated on a percentage system. The applicant must have 50% positive credit on the current status of all accounts. Any accounts, excluding judgements that are over two years old will be waived in determining percentage of credit. No credit history will be interpreted as good credit, but an additional deposit may be required. If an applicant takes exception with the credit finding, he or she is responsible for contacting the credit bureau. If the discrepancy can be cleared up, applicant will be considered on a basis of new information.
4. **RENTAL HISTORY:** Minimum of one-year rental history consisting of no more than two (2) late payments per year

**AN APPLICANT WILL AUTOMATICALLY BE DENIED FOR THE FOLLOWING
REASONS:**

- A. Anyone who has unresolved debts to a previous landlord/mortgagor and/or noncompliance with the terms of the lease/contract and/or community policies.
 - B. Anyone that has been evicted by a previous landlord for cause.
 - C. Anyone has been convicted of a felony within the past seven years.
 - D. Falsification of any information on the rental application.
 - E. Anyone currently in the process of filing a bankruptcy.
5. **AGE:** Applicants must be at least 18 years of age.
 6. **OCCUPANCY: Maximum number of occupants per apartment: 1 bedroom and one bath: 2 occupants; Two bedrooms and two baths: 4 occupants; Three bedrooms and two baths: 6 occupants. If for any reason, the number of occupants exceeds the maximum number for that floor plan, residents will have until the expiration of the lease term to transfer to the appropriate floor plan to comply with our occupancy limits.**
 7. **SECURITY DEPOSIT:** A security deposit is required and must be paid in full prior to moving in. If applicant is not approved, a check for the amount of holding will be mailed within 30 days. The holding deposit is non-refundable upon applicant cancellation after 24 hours.
 8. **PET DEPOSIT/PET POLICY:** Pets may be allowed with a deposit, in addition to a monthly pet rent and/or a one-time fee. All residents with pets must have a pet agreement on file. (The only exception would be pets, which are designated, as service animals required to accompany a resident with a verified disability for the specific purpose of aiding that person).
 9. **GARAGES:** Applicant agrees to management's assignment of garages spaces.
 10. **RENT:** All move in rents, deposits, and fees must be paid by money order or cashier's check. If the bank returns the holding deposit check, application will automatically be denied.

Signature: _____

Date: _____

APPLICATION AND OFFER TO RENT/LEASE REAL PROPERTY

Managed by: **Stout Management**

THE PROPERTY:

APTS.

Agent: _____ Telephone: (702) _____ Fax : (702) _____

RESERVATION INFORMATION:

Address of Apartment/Unit:	Apt or Unit #	City:	Zip:
Rental Rate \$ _____ per _____	Concessions Offered:	Intended Move In Date:	Length of Lease Term:
		Marketing Source:	

Instructions to Applicant:

Use **black ink**. Except for your signature, all information in this Application must be **PRINTED** in a clear and legible manner. One Application must be filled out **ENTIRELY** and **COMPLETELY** by each intended adult occupant. Each Applicant must show satisfactory identification to owner/manager at the time this application is submitted for processing.

APPLICANT'S PERSONAL DATA

(_____) _____ (_____) _____
Home Phone Work Phone

E-MAIL ADDRESS, Applicant:

Co-Applicant:

FULL NAME: FIRST-MIDDLE-LAST-	SOCIAL SECURITY	DRIVER LICENSE	STATE	BIRTH DATE
SPOUSE:				
ALL OTHER NAMES BY WHICH YOU HAVE BEEN KNOWN:				

OTHER PERSONS TO OCCUPY THE PROPERTY

FULL NAME	RELATIONSHIP	D.O.B.	OCCUPATION

PREVIOUS ADDRESS HISTORY (List ALL residences for at least the past 2 years. START WITH PRESENT ADDRESS.)

STREET ADDRESS	CITY	STATE	ZIP	DATE IN	\$ RENT/MO	LANDLORD NAME AND PHONE

EMPLOYMENT HISTORY (List ALL employers for the past 2 years. START WITH PRESENT EMPLOYER.)

COMPANY			POSITION OR OCCUPATION	START/END DATE	MONTHLY WAGE
NAME	ADDRESS	PHONE			

BANKING INFORMATION

BANK OR S&L NAME	BRANCH	PHONE	DATE OPENED	PRESENT BALANCE

NEAREST RELATIVE REFERENCES (NOT LIVING WITH YOU)

FULL NAME	RELATIONSHIP	ADDRESS	PHONE

IN CASE OF EMERGENCY NOTIFY

FULL NAME	RELATIONSHIP	ADDRESS	PHONE

Does your Emergency Contact Have PERMISSION to ENTER Apt.# _____ **,In the Event of an EMERGENCY: YES NO**

AUTOMOBILES

MAKE	MODEL	YEAR	LICENSE NUMBER	INSURANCE CO.

ACTIVE CREDIT ACCOUNTS

CREDITOR	YEAR OPENED	CREDITOR	YEAR OPENED

	YES	NO
DO YOU INTEND TO INSTALL A SATELLITE DISH?		
DO YOU HAVE OR INTEND TO HAVE WATER FILLED FURNITURE IN THE RENTAL UNIT?		
HAS ANY CIVIL JUDGEMENT BEEN ENTERED AGAINST YOU FOR THE COLLECTION OF A DEBT IN THE PAST 10 YEARS?		
DO YOU HAVE OR INTEND TO HAVE ANY PETS IN THE RENTAL UNIT? Type and Breed:		
HAVE YOU FILED FOR BANKRUPTCY IN THE PAST 10 YEARS?		
HAVE YOU EVER BEEN EVICTED OR REFUSED TO PAY RENT FOR ANY REASON?		
HAVE YOU EVER BEEN ARRESTED FOR A FELONY OR CONVICTED FOR A MISDEMEANOR?		
IF ANY QUESTION ABOVE HAS BEEN ANSWERED "YES", PLEASE EXPLAIN:		

The undersigned Applicant hereby offers to rent/lease real property described as _____ APARTMENTS. It is understood that this Application is not a Rental Agreement/Lease and that Applicant has no rights to said property until a Rental Agreement/Lease is duly executed after the approval of this Application.

A non-refundable credit check fee of \$ _____ to process this Application and an Application Deposit of \$ _____ as earnest money will be given by Applicant to the owner/manager when this Application is turned in for processing.

The Application Deposit is fully refundable within thirty (30) days of receipt, if Applicant is rejected, or if written notice revoking this offer is received within 24 hours of receipt of deposit. Application Deposit will be forfeited if applicant revokes this offer after the initial 24-hour period.

Applicant represents all information in this Application to be true and accurate. Applicant hereby authorizes owner/manager and his/her/its employees and agents to verify said information and make independent investigations in person, by mail, phone, fax, or otherwise, to determine Applicant's rental, credit, financial and character standing. Applicant hereby releases owner/manager, his/her/its employees and agents and any and all other firms or persons investigating or supplying information, from any liability whatsoever concerning the release and/or use of said information and further, will defend and hold them all harmless from any suit or reprisal whatsoever. All holders, public and private, of any such information are hereby authorized to release, without reservation or limitation, any and all such information they have concerning Applicant and in so doing, will be acting on Applicant's behalf at Applicant's request and will be held blameless and without any liability whatsoever. A copy, fax, or other reproduction of this Authorization shall be as effective as the original.

NOTE: If this application is accepted, following are the initial move-in costs and are to be paid by cashiers check or money order **ONLY**. **NO PERSONAL CHECKS** are accepted at move-in. After move in, rent may be paid by personal check. Utilities must be put in resident's name prior to move-in. Bring verification at time of move-in.

Pro-rate Rent	\$ _____	Pet Rent	\$ _____
Additional Month Rent	\$ _____ *	Application Fee	\$ _____
Utilities	\$ _____	Garage/Storage/Insurance	\$ _____
Pet Deposit (refundable)	\$ _____	Washer Dryer Rent	\$ _____
Security Deposit	\$ _____ **	Concessions off rent only	\$ < _____ >
KEY/Gate Deposit	\$ _____	TOTAL DUE	\$ _____
Redecorating Fee (NR) (cleaning)	\$ _____	LESS; RECEIVED TODAY	\$ < _____ >
Qualifying Fee	\$ _____	TOTAL DUE AT MOVE-IN	\$ _____

*(Charged if after the 25th of month) ** Extra deposit may be required depending on rental criteria

(Revised 11-10-15)

_____	Applicant's Signature	_____	Applicant's Name PRINTED
_____	Applicant's Signature	_____	Applicant's Name PRINTED
_____	Agent	_____	

COPY OF RENTAL CRITERIA GIVEN TO APPLICANT: _____



TENANT RELEASE AND CONSENT

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

INFORMATION COVERED

I 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 understand that this authorization cannot be used to obtain information about me that is not pertinent to my 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 Administrations
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 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 one year and one month** from the date signed. I understand I have a right to review this file and correct any information that is incorrect.

SIGNATURE

Applicant/Resident

Print Name

Date

NOTE: THIS GENERAL CONSENT MAY NOT BE USED TO REQUEST A COPY OF A TAX RETURN. IF A COPY OF A TAX RETURN IS NEEDED, IRS FORM 4506, "REQUEST FOR COPY OF A TAX FORM" MUST BE PREPARED AND SIGNED SEPARATELY.