You should fill out this application if you are:

- ✓ Able to provide documentation of income that is 3x the rent for the prior 6 months.
- ✓ Eviction free for the prior 24 months (that means no evictions <u>filed</u> against you).
- $\checkmark$  Fully able and committed to paying rent in full and on time.
- ✓ Considerate of others.
- ✓ Willing and able to complete the application honestly and completely.

You should not fill out this application if:

- $\checkmark$  You do not meet the income or past eviction requirements.
- ✓ There's a good chance you will not be able to pay rent in full and on time.
- ✓ You do not have friends or family who would be willing to lend you money should you not be able to pay rent in full and on time. Late rent may not be accepted and, if accepted, comes with high late fees.
- ✓ You believe that your needs or wants are more important that others'.

We look for people who will be good tenants and good neighbors.

If you are unable or unwilling to be both, please do not apply.

#### EACH ADULT PLANNING TO RESIDE IN THE UNIT MUST COMPLETE A SEPARATE APPLICATION $\rightarrow \rightarrow \rightarrow \rightarrow \rightarrow$ All Blanks <u>MUST</u> Be Filled In To Be Considered. Failure to fill out completely will delay processing and may be reason for disqualification. $\leftarrow \leftarrow \leftarrow \leftarrow$

#### Applicants <u>must</u> provide:

- $\Box$  copy of driver's license or other state-issued, picture I.D.
- \*\*Documentation to support income. For earned income include your pay stub showing year to date information (plus last pay stub of last year or last year's W2 if application filed before Junel 1)

Note: ALL references and significant facts are verified. Failure to provide complete and accurate information is grounds for rejection.

# (Initial) \_\_\_\_\_ Applicant is made aware that part of the application process includes a visit to the applicant's current residence. We find that how a resident takes care of their current home is a good indicator of how they'll take care of ours.

<u>Applicant</u> :						
Last Name		_ First		N	fiddle (full name)	
SSN: <sup>1</sup>		Date of Birth:			_	
SSN: <sup>1</sup> Telephone h: ()	w:	()		c: (	)	-
Applicant prefers calls	to(primary) p	phone be made bet	tween the h	ours of:		·
Primary email:			Driver's Li	cense Sta	.te#	
Other names currently of	or previously used (inc	cluding maiden na	me):			
Applicant:  Smokes	$\Box$ Does not smoke					
Other Occupants: Tot						
						If any applicant is rejected for
other than financial reas						
Name	DOB	SSN:		Rel.		
Name	DOB	SSN:		Rel.		
Defen I'st all materials						
Pets: List all pets that w			m			
Туре:	Breed (if dog)		_ Type:		Breed (if dog)	
Vehicles:						
License Plate #	State	Make	Year	Color_	VIN	
License Plate #	State	Make	Year	Color_	VIN	
Personal References:						
Name		Phone			Relationship	
					F	
Address:						
Name		Phone			_ Relationship	
Address:						
/ Kullebb						
Professional Referenc	es:					
		Phone			Relationship	
					-	
Name		Phone			_Relationship	

<sup>&</sup>lt;sup>1</sup> Applicant is hereby notified that SSNs, birth dates, driver's license numbers and other identifying information will be reported to tenant tracking agencies and/or credit reporting agencies if tenant violates the terms of the lease or if landlord is awarded damages in court that are not fully paid.

		кепта Арр			
APPLICANT MUST PROVIDE A	MINIMU	<mark>M OF 24 MON</mark>	THS OF RESIDENT	TIAL HISTORY AND COMPLETE	
CONTACT IN	<b>IFORMAT</b>	ION FOR CUR	RENT AND PRIOR	LANDLORDS	
Applicant's Current Address:					
Street	Apt	City	State	Zip	
If unit is a rental list name(s) of tenant(s) o	n lease*:				
*Note: landlord will be contacted. If appli	cant is not c	on the lease, an a	uthorized tenant must	also sign the authorization to release	
information. See last page of application.				-	
Owner/Agent NameOwner/Agent phone ()					
Owner/Agent/ Address			City	State Zip	
Date of occupancy	Date of occupancy Rent/mortgage per month \$				
Reason for Leaving					
Avg monthly utilities \$	_ (check ut	ilities for which	you pay Elec Gas	Water )	
List the name of the person to whom	the following	ng bills are sent:	Gas & Electric Com	pany	
Water Company					
Telephone Company		For Tel	le# ()		
Applicant's Prior Address:					
Street	Apt	City	State	Zip	
If unit is a rental list name(s) of tenant(s) o	n lease*:				
*Note: landlord will be contacted. If appli	cant is not c	on the lease, an a	uthorized tenant must	also sign the authorization to release	
information. See last page of application.					
Owner/Agent Name		0	wner/Agent phone (_	)	
Owner/Agent/ Address					
Date of occupancy From:	To:		Rent/mortgage pe	er month \$	
Reason for Leaving					
Avg monthly utilities \$	_ (check ut	ilities for which	you pay Elec Gas	Water )	
List the name of the person to whom	the following	ng bills are sent:	Gas & Electric Com	pany	
Water Company					
Telephone Company		For Te	le# ()		



\*Be sure to provide <u>complete</u> information for <u>24</u> months of residency. If residing at current and prior address for less than 24 months, include additional information on back of sheet to account for 24 months of residence history.

#### APPLICANT MUST PROVIDE A MINIMUM OF 24 MONTHS OF EMPLOYMENT HISTORY

<u>Applicant's Employment History:</u> Current Employer		Supervisor (Mr./Ms)					
Address		I \	Zip				
Supervisor's Phone ()			1				
Other source of current income (SSI, Fo	od stamps, etc. Attach supp	orting documentation:	-				
· · · · · · · · · · · · · · · · · · ·		Gross Monthly Inc	ome \$				
Previous Employer							
	Supervisor	r (Mr./Ms)					
Address	City	State Z	Zip				
Supervisor's Phone ()	Hire date:	Termination date:	Position				
Gross Monthly Income \$							
Reason For Leaving							

Other amounts and sources of income (be sure to include copies of documentation)



\*Be sure to provide <u>complete</u> information (including proof of pay) for <u>24</u> months of employment. If employed for less than 24 months at the locations above, include additional employment information on back of sheet to account for 24 months of employment history.

If applicant's employer charges a fee to provide employment verification information, the fee will be deducted from the application fee prior to crediting the application fee to the security deposit.

Have you or has any of the listed "other occupants" ever:

1) been convicted of any crime other than a minor traffic offense? ( ) Yes ( ) No

- 2) filed bankruptcy? ( ) Yes ( ) No
- 3) had any judgments or other legal proceedings filed against you/them? ( ) Yes ( ) No

4) filed a court case against another person? ( ) Yes ( ) No

5) been served an eviction notice or been asked to vacate a property you/they were renting? ( )Yes ( ) No

6) willfully or intentionally refused to pay rent when due? ( ) Yes ( ) No

7) changed your/their name? ( ) Yes ( ) No. If other than due to marriage or divorce, explain:

8) been convicted of illegal manufacture or distribution of any controlled substance? ( ) Yes ( ) No. Do you know of anything that may interrupt your income or ability to pay rent? ( ) Yes ( ) No Are you or is any of the listed "other occupants" presently an illegal abuser of a controlled substance? ( ) Yes ( ) No. **If your answer was ''yes'' to any of the above questions, provide complete details on a separate page.** 

I have re-examined the information that I have provided on this application, and I agree that it is true and complete. Except as noted above, (1) I have never been nor am I now being dispossessed or evicted from any rental unit; (2) I have never broken or in any manner failed to honor a lease or rental agreement. I understand that providing false or incomplete information on this application shall be grounds for immediate rejection.

I am paying a non-refundable application fee of \$35 (thirty five) DOLLARS. I understand that if this application is accepted and I complete a Rental and Security Deposit Agreement, \$35 (thirty five dollars) of the  $1^{st}$  applicant's application fee and \$15 of each co-applicant's fee will be credited toward the security deposit. I also understand that if this application is not accepted, my application fee will be forfeited.

If this application is accepted, I agree to:

- 1) Pay a Property Retainer Fee in an amount equal to the Security Deposit and sign the Property Retainer Agreement to hold the property on my behalf. I will do this within 48 hours of notification that this application has been approved. Retainer Fee will be paid in cash, bank check or money order.
- 2) Sign the Owner/Agent's Rental and Security Deposit Agreement and any related documents within the timeframe specified in the Property Retainer Agreement.
- 3) Pay the first month's rent, as stated in the Rental and Security Deposit Agreement, in cash, bank check or money order upon receiving keys.

### Before you return your application, have you

- □ Included a copy of driver's license or other state-issued, picture I.D.?
- □ Included a copy\* of your Pay stub showing year to date information (plus last pay stub of last year if application filed before April 1)?
- □ Included copies\* of supporting documentation of any other income/support listed?
- □ Filled out the application **completely**, accurately and legibly?

## If not, we cannot process your application.

Complete applications which include all necessary documentation are processed in the order received and will be processed ahead of previously submitted incomplete applications and applications missing necessary documentation.

\*We strongly prefer to receive copies of requested documentation. If applicant provides originals and wants them returned, they will be returned by mail to the applicant's current address.

\*\*I hereby authorize \_Property Investments of Note, LLC and/or its agents \_\_to obtain information concerning my past and present credit, rental, criminal and/or employment history, and to answer any questions posed by others in the future regarding their rental experience with me. I hereby authorize any of the following sources, including but not limited to (1) credit reporting agencies, (2) public or privately owned utility companies, (3) governmental housing agencies, and (4) current or past landlords, employers or creditors (5) law enforcement agencies, to release any said information to the above named party. I hereby release any of the above sources, their officers, agents, or employees, from any liability for damages of any kind whatsoever, whether caused by negligence or not, which may at any time result to me by reason of compliance with the above mentioned inquiry, which may include the answering of specific questions and the giving of any information concerning my present or past record or residence. This authorization begins immediately and expires 36 months after the termination of tenancy.

Applicant Date

## Only complete the portion below if the applicant was not a signer on one of the residences listed on page 2.

If the applicant was not a signer on a lease for a current or prior residence listed on page 2 of this application, then an authorized tenant of that lease must sign below to authorize release of information by the current or prior landlord:

Current/Prior residence address (from page 2)	
Tenant (signor) on the lease for that address:	
(Printed)	
	Date:
(signature)	
Current/Prior residence address (from page 2)	
Tenant (signor) on the lease for that address:	
(Printed)	
	Date:
(signature)	
Current/Prior residence address (from page 2)	
Tenant (signor) on the lease for that address:	
(Printed)	
	Date:
(signature)	