

Laurel Park Apartments

176 Maurice Street North

Twin Falls, ID 83301

Phone: (208) 734-4195

Email: laurelpark@mathercapital.com

RENTAL QUALIFICATIONS

| | | |
|-------------------------|--|--------------------|
| Fair Housing | We will show, qualify, refer and lease to a prospect in accordance with Federal Fair Housing Laws. We do not discriminate against any person because of race, color, religion, sex, national origin, familial status or disability. | |
| Age | Must be at least 18 years of age to sign a lease contract. | |
| Application | Must be completed by each single adult applicant (18 years of age or older) without omissions or falsifications. Married couples may complete one application. Married couples must have same last name to fill out one application. Cost per application is \$35 and is non-refundable. | |
| Lease Term | Minimum of six months. | |
| Deposits | \$250.00 for a One or Two bedroom. | |
| Pets | None allowed. | |
| Occupancy Limits | <u>Bedroom</u> | <u>Occupants</u> |
| | Studio/Efficiency | Two (2) Occupants |
| | One (1) Bedroom | Two (2) Occupants |
| | Two (2) Bedroom | Four (4) Occupants |
| | Three (3) Bedroom | Six (6) Occupants |

***** One additional occupant will be allowed in any unit provided the additional occupant is under the age of one (1) year old for the lease term. Resident will be required to transfer to a larger apartment at the time of lease expiration/renewal if the child is over the age of one (1).

WE VERIFY THE FOLLOWING ON ALL RESIDENTS:

| | |
|---------------------------|--|
| Employment History | Current and past employment of one (1) year. Students graduating from high school or attending higher education may substitute school work for employment history. A qualifying guarantor is acceptable with collection of an additional application fee. |
| Income | Monthly gross income at least three (3) times the monthly rate. Child Support payments and/or Alimony payments will be considered when court ordered. Income other than wages or salary (including but not limited to grants and student loans) may require verification. A qualified guarantor will be accepted if income qualifications can not be met. Self employment income must be verified including check stubs. |
| Rental History | At least six (6) months in which all lease terms were satisfactory. Proof of previous homeownership may be required. |
| Credit History | Number of credit accounts in good standing must be greater than number of credit accounts delinquent or charged off. No credit history is acceptable. An additional deposit equal to one (1) months rent will be required if credit history criteria can not be met. |
| Criminal History | Any application of a person who has been convicted or received deferred adjudication of a crime involving drugs, violence, property damage or a felony will not be approved. |
| Guarantor | Income—five (5) times monthly rent. Verification of income may be required. No credit charge offs or write-offs. No broken leases, skips or foreclosures. |

I have read all of the above and understand the qualifications.

(signature)



This apartment community professionally managed by:
Mather Capital Corporation • Sun Valley, Idaho
www.mathercapital.com

MATHER CAPITAL CORPORATION
P.O. Box 187
Sun Valley, Idaho 83353

Rental Application

| FOR OFFICE USE ONLY | |
|---------------------|---------------|
| DATE | _____ |
| PROPERTY | _____ |
| APT. NO. | RENT \$ _____ |
| AGENT | _____ |

Please complete all requested information on the front and back of this form. Thank you for your interest in our apartments.

| | |
|---|---------------------------------|
| Date of Application _____ | Desired Date of Occupancy _____ |
| Type and Size of Apartment Wanted (No. of Bedrooms, etc.) _____ | |

PERSONAL INFORMATION

| | | |
|--------------------------------|---------------------------------|--------------------|
| APPLICANT'S FULL NAME _____ | Date of Birth _____ | |
| Social Security No. _____ | Driver's Lic. No. / State _____ | E-mail _____ |
| Home Phone _____ | Work Phone _____ | Cell Phone _____ |
| CO-APPLICANT'S FULL NAME _____ | Date of Birth _____ | |
| Social Security No. _____ | Driver's Lic. No. / State _____ | Relationship _____ |
| E-mail _____ | Home Phone _____ | Cell Phone _____ |

| Full Names of All Other Residents: | Relationship to You | Date of Birth |
|------------------------------------|---------------------|---------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

How Many Pets Do You or Other Occupants Own? _____
Kind of Pet, Breed, Weight and Age _____
How Did You Hear About Our Property? _____

RESIDENCE HISTORY

| | | |
|---|-------------------------|----------|
| PRESENT ADDRESS _____ | | |
| Present Telephone _____ | Dates From _____ | To _____ |
| Present Landlord or Mortgage Co. _____ | Telephone _____ | |
| Monthly Payment \$ _____ | Reason for Moving _____ | |
| PREVIOUS ADDRESS _____ | | |
| Dates From _____ | To _____ | |
| Previous Landlord or Mortgage Co. _____ | Telephone _____ | |
| Monthly Payment \$ _____ | Reason for Moving _____ | |

EMPLOYMENT INFORMATION

| | | |
|-------------------------------|------------------|-------------------------------|
| PRESENT EMPLOYER _____ | Dates From _____ | To _____ |
| Employer's Address _____ | Telephone _____ | |
| Position _____ | Supervisor _____ | Gross Monthly Salary \$ _____ |
| PREVIOUS EMPLOYER _____ | Dates From _____ | To _____ |
| Employer's Address _____ | Telephone _____ | |
| Position _____ | Supervisor _____ | |
| CO-APPLICANT'S EMPLOYER _____ | Dates From _____ | To _____ |
| Employer's Address _____ | Telephone _____ | |
| Position _____ | Supervisor _____ | Gross Monthly Salary \$ _____ |

BANKING AND CREDIT REFERENCES

BANK NAME & BRANCH _____ Telephone _____
 Checking Acct. No. _____ Savings Acct. No. _____
 Loan Acct. No. _____ Monthly Payment \$ _____
 CREDIT REFERENCE _____ Telephone _____
 Address _____ Account No. _____
 CREDIT REFERENCE _____ Telephone _____
 Address _____ Account No. _____
 OTHER REFERENCE _____
 Address _____

OTHER INFORMATION

TOTAL NUMBER OF VEHICLES (Including Company Vehicles) _____
 Make/Model _____ Year _____ Color _____ Tag No./State _____
 Make/Model _____ Year _____ Color _____ Tag No./State _____
 Other Car, Motorcycle, etc. _____
 Total Gross Monthly Household Income \$ _____
 If there are other sources of income you would like us to consider, please list income, source and person (Banker, Employer, etc.) who we could contact for confirmation. You do NOT have to reveal alimony, child support or spouse's annual income unless you want us to consider it in this application.
 Amount \$ _____ Per _____ Source _____ Telephone _____
 Amount \$ _____ Per _____ Source _____ Telephone _____
 Comments: _____

HAVE YOU OR CO-APPLICANT EVER: Been sued for non-payment of rent? Yes No
 Been evicted or asked to move out? Yes No Broken a Rental Agreement or Lease? Yes No
 Been sued for damage to rental property? Yes No Declared Bankruptcy? Yes No

In Case of Personal Emergency, Notify _____ Relationship _____
 Address _____ Home Phone _____ Work Phone _____

I hereby make application for an apartment and certify that this information is correct. I authorize you to contact any references that I have listed. I also authorize you to obtain my consumer credit report from your credit reporting agency, which will appear as an inquiry on my file.

APPLICANT'S SIGNATURE _____
 CO-APPLICANT _____
 DATE SIGNED _____

FOR OFFICE USE ONLY — DO NOT WRITE BELOW

Date Application Received _____ Received By _____

| REFERENCE VERIFICATION | REMARKS |
|---|---------|
| <input type="checkbox"/> Present Landlord | |
| <input type="checkbox"/> Previous Landlord | |
| <input type="checkbox"/> Employment | |
| <input type="checkbox"/> Previous Employ. | |
| <input type="checkbox"/> Co-Applicant Employ. | |
| <input type="checkbox"/> Bank | |
| <input type="checkbox"/> Credit (1) | |
| <input type="checkbox"/> Credit (2) | |
| <input type="checkbox"/> Credit (3) | |
| <input type="checkbox"/> Other | |

| RECORD OF PAYMENTS RECEIVED | | |
|-----------------------------|-------------|--------|
| Date | Description | Amount |
| | | |
| | | |
| | | |
| | | |
| | | |

THIS APPLICATION: Approved Not Approved

Date _____
 By _____
 Assigned to Apt. No. _____ Rent \$ _____
 Apartment Address _____
 Applicant Notified By _____
 Anticipated Move-In Date _____