

## Community Residential Application

**APPLICANT PHONE#:** \_\_\_\_\_

Upon investigation and verification of the information provided, BPMG, LLC will make a recommendation regarding an approval or denial of residency. In the event that a majority, but not all of the residency requirements are met, an approval conditioned upon any or all of the following may be made: (as) first and last month's rent, (b) qualified roommate, (c) Co-Signer Agreement (Consigners must be approved unconditionally to qualify), and/or (d) additional security deposit.

**One Applicant**    
  **Co-Applicant**    
  **Co-Signer**    
  **Add-On Roommate**

### Applicant Information

Full Name: \_\_\_\_\_

*Last*
*First*
*MI*
*Social Security Number*
*Date of Birth:*

Additional Names Used: \_\_\_\_\_

Please list the names and ages of all persons under the age of 18 who would reside in apartment.	Name(s)	Age(s)

### Vehicle Information

Vehicle #1	Make	Model	Color	License Plate #	State (License Plate)
Vehicle #2	Make	Model	Color	License Plate #	State (License Plate)

### Personal Information

<b>Have you ever used another social security number?</b>	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, please explain and provide other social security number(s):
<b>Have you ever filed for Bankruptcy?</b>	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, please explain and provide date of bankruptcy:
<b>Have you ever been convicted of a felony crime?</b>	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, please explain:
<b>Are you a full-time student?</b>	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
<b>Do you require special accommodations?</b>	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, please explain what accommodations you require:
<b>Have you ever been evicted?</b>	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, please explain and provide date(s):
<b>Do you currently owe any apartment community money?</b>	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, please explain:
<b>Do you have renter's insurance?</b>	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, please provide insurance company name, policy number and agent contact info.:

### Current Residence Information

<b>Street Address, including Apartment Number</b>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
<b>Landlord:</b> <input type="checkbox"/> Mortgage Company <input type="checkbox"/> Apartment Community <input type="checkbox"/> Other	<i>From (MM/YY)</i>	<i>To (MM/YY)</i>	<i>Monthly Payment</i>
<b>Current Address Name:</b>			
<b>Landlord Street Address</b>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
<i>Landlord Phone</i>			Own <input type="checkbox"/> Rent <input type="checkbox"/>
<b>Street Address, including Apartment Number</b>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
<b>Landlord:</b> <input type="checkbox"/> Mortgage Company <input type="checkbox"/> Apartment Community <input type="checkbox"/> Other	<i>From (MM/YY)</i>	<i>To (MM/YY)</i>	<i>Monthly Payment</i>
<b>Previous Address Name:</b>			
<b>Landlord Street Address</b>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
<i>Landlord Phone</i>			Own <input type="checkbox"/> Rent <input type="checkbox"/>

## Employment Information

Company: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Salary: \$ \_\_\_\_\_  Yearly  Monthly  Hourly

From (Date) To (Date)

HR Contact Name: \_\_\_\_\_ HR Contact Phone Number: \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Salary: \$ \_\_\_\_\_  Yearly  Monthly  Hourly

From (Date) To (Date)

HR Contact Name: \_\_\_\_\_ HR Contact Phone Number: \_\_\_\_\_

## Credit Information

Auto Loan – Payment Made to: \_\_\_\_\_ Phone Number \_\_\_\_\_ Loan Number \_\_\_\_\_ Monthly Payment: \_\_\_\_\_

Checking Acct Bank Name: \_\_\_\_\_ Phone Number \_\_\_\_\_ Account Number \_\_\_\_\_ Monthly Payment: \_\_\_\_\_

Savings Acct Bank Name: \_\_\_\_\_ Phone Number \_\_\_\_\_ Account Number \_\_\_\_\_ Monthly Payment: \_\_\_\_\_

Other Loan/Credit Reference: \_\_\_\_\_ Phone Number \_\_\_\_\_ Account Number \_\_\_\_\_ Monthly Payment: \_\_\_\_\_

## Signature and Consent

I agree to pay BPMG, LLC an application screening charge in the amount of \$ 40.00 (cash) which is earned upon the submission and receipt of this application. I understand I acquire no rights to the above property until I sign a rental agreement and submit a holding fee in the amount of \$ 200.00 (applied towards turnover expenses upon move out). The applicant's copy of this application will serve as a receipt of payment for the screening charge collected. I authorize and direct BPMG, LLC to obtain such credit reports, character reports and/or criminal reports, verification of rental and employment history as it deems necessary to verify all information set forth in the above application. I further understand that false, fraudulent misleading or incomplete information may be grounds for denial of tenancy or subsequent eviction. There are no other agreements express or implied between the parties.

In accordance with State and Federal laws, you are hereby notified that an investigation may be made of the information you provided on this application together with information as to your character, general reputation, personal characteristics, and mode of living. You have the right to dispute the accuracy of information obtained from the entities you have disclosed above, and, upon written request, the right to complete and accurate disclosure of the scope of this investigation and/or a written summary of your rights under the Fair Credit Reporting Act.

Applicant Signature

Date

The undersigned agent for the above referenced property certifies that the information sought herein is for the purpose of evaluation of the applicant's tenancy and for no other purpose.

Community Residential Specialist/Manager Signature

Date

