

Rental Application

Community: _____ Apartment #: _____ Type: _____ Today's Date: _____

Leasing Consultant: _____ Move-In Date: _____

How did you learn of us?											
NAME (First, Middle, Last)			Birthdate / /		Soc. Sec. #: Dr. Lic. #: Foreign Citizen ID#		Home Phone #:		Cell Phone #:		
SPOUSE (First, Middle, Last)			Birthdate / /		Soc. Sec. #: Dr. Lic. #: Foreign Citizen ID#		Work Phone #:		E-mail Address:		
ADDRESS											
Present:	Street		Apt.#	City	State	Zip	<input type="checkbox"/> Own-Mortgage Co. <input type="checkbox"/> Rent-Owner: Landlord's Phone #:	Monthly Pymt. \$	Date moved-in:		
Previous:	Street		Apt.#	City	State	Zip	<input type="checkbox"/> Own-Mortgage Co. <input type="checkbox"/> Rent-Owner: Landlord's Phone #:	Monthly Pymt. \$	Address From/To:		
Previous:	Street		Apt.#	City	State	Zip	<input type="checkbox"/> Own-Mortgage Co. <input type="checkbox"/> Rent-Owner: Landlord's Phone #:	Monthly Pymt. \$	Address From/To:		
EMPLOYMENT											
Current:	Company		Address		City, State		Monthly Income:	Position	Phone #	Employed Since	
Previous:	Company		Address		City, State		Monthly Income:	Position	Phone #	Employed From/To:	
Spouse:	Company		Address		City, State		Monthly Income:	Position	Phone #	Employed Since	
REFERENCES											
Bank:	Bank Name		Checking Acct. #:		open <input type="checkbox"/>	closed <input type="checkbox"/>	Branch Location		City, State	Bank's Phone #:	
Bank:	Bank Name		Savings Acct. #:		open <input type="checkbox"/>	closed <input type="checkbox"/>	Branch Location		City, State	Bank's Phone #:	
OTHER INCOME											
Type of Other Income:	Income Source:		<input type="checkbox"/> Monthly, or <input type="checkbox"/> Annual	Income Amt.:	\$	Type of Other Income:		Income Source:	<input type="checkbox"/> Monthly, or <input type="checkbox"/> Annual	Income Amt.:	
\$											
OTHER OCCUPANTS:											
Full Name		Birthdate		Full Name		Birthdate		Full Name		Birthdate	
PET (Possession of a pet may require a pet deposit and/or agreement)											
<input type="checkbox"/> No Pet, <input type="checkbox"/> Yes Pet - if yes: How many?	Type:	Breed:	Weight:	Color:	Age:	Name:					
EMERGENCY CONTACT:											
Full Name		Address				City	ST	Zip	Phone #		
PARENTS or CLOSEST RELATIVE:											
Full Name		Address				City	ST	Zip	Phone #		
AUTOMOBILE/S											
1 st Car	Year	Make	Model	Color	Tag #	State					
2 nd Car	Year	Make	Model	Color	Tag #	State					
MILITARY STATUS (Active Duty Only)											
Rank:	Monthly Pay:		Enlistment Ends (Mo/Day/Yr):		Assigned to Unit:						
\$											
Unit's Address:	Street/P.O. Box		City		State		Zip		Unit Telephone		
Immediate Non-com:	Commanding Officer:		Unless given a permanent change-of-duty (unknown to me at this time), I will be able to fulfill this agreement. I understand that military orders authorizing base housing DO NOT constitute change-of-duty, nor does assignment to a cruise relieve me of this agreement's term. <input type="checkbox"/> YES								

ACKNOWLEDGEMENT

I hereby consent to allow Simpson Property Group, LP, through its designated agents and employees, to obtain and verify the above information including references, credit information and criminal background if required for the purpose of determining whether or not to lease to me an apartment. I understand that Simpson Property Group, LP and its agents shall have a continuing right to review my credit information, rental application, criminal background, payment history and occupancy history. The applicant has paid a non-refundable fee of \$ _____ for the costs and expenses in checking credit and references. Applicant represents that statements made on application are true and complete. Applicant acknowledges that false information will constitute reason for denial of application, termination of right of occupancy and forfeiture of deposits and fees paid.

Applicant has paid \$ _____ earnest money to hold an apartment available from date of application to date of lease initiation. In no event shall period exceed 30 days. If this application is not approved, applicant withdraws application within 72 hours of the date of application, or apartment for any reason is not available for occupancy, \$ _____ of the earnest money will be refunded. After the initial 72-hour period, if applicant cancels the application, refuses to sign the lease or occupy the premises on the agreed date, earnest money is forfeited. Upon occupying the premises, earnest money will be applied to monies owed at the time of move-in, such as apartment deposit, miscellaneous fees, rent, etc.

Simpson Property, LP does business in accordance with the Equal Credit Opportunity Act, which prohibits discrimination against credit applicants on the basis of gender or marital status. Simpson Property, LP follows Fair Housing Laws and does not discriminate based on gender, race, color, religion, national origin, familial status or disability.

Any changes to the above provisions must be made in writing. Any provisions not specifically noted on this application must be in writing.

I HAVE READ AND AGREE TO THE ABOVE PROVISIONS AS STATED.



Applicant's Signature _____ Date _____ Spouse's Signature _____ Date _____

SUMMARY

VERIFICATION For Office Use Only

Apartment Deposit Due: \$ _____		Monthly Rent: \$ _____		Present Address [] []		<input type="checkbox"/> Rental Criteria Sheet Signed	
Non-refundable Fee Due: \$ _____		Pet Rent: \$ _____		Previous Address [] []		Comments: _____	
Pet Deposit and/or Fee Due: \$ _____		Garage Rent \$ _____		Previous Address [] []		_____	
Application Fee Due: \$ _____		Other: _____: \$ _____		Present Employer [] []		_____	
Other: _____ \$ _____		Total Monthly Rent: \$ _____		Previous Employer [] []		_____	
Other: _____ \$ _____		Length of Lease: _____		Spouse's Employer [] []		_____	
Prorated Rent Due (____ to ____) \$ _____		Lease Term: From ____ To ____		Checking Account [] []		Community Manager's Review:	
1 st Month's Rent: \$ _____		Date of Application: _____		Savings Account [] []		<input type="checkbox"/> Approval Date: _____	
TOTAL Monies Due: \$ _____		Concession: _____		Other Income [] []		<input type="checkbox"/> Denial Date: _____	
TOTAL Paid with Application: \$ _____				Monthly Income:		Reason/s: _____	
TOTAL DUE before move-in: \$ _____				Applicant \$ _____		_____	
				Spouse \$ _____		_____	
				Other Income \$ _____		_____	
				Total Monthly Income: \$ _____		Community Manager Signature _____	
				SafeRent Summary:		Letter sent to Applicant/s	
				_____		<input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Other	
				_____		Date Letter Sent: _____	