



# APPLICATION FOR RESIDENCY

(Please print clearly)



<b>FOR OFFICE USE ONLY</b>	Today's Date		
	Date Received		
	Received By		
	<input type="checkbox"/> Approved <input type="checkbox"/> Declined Date:		
	Apartment Address		
	Apartment Size	Move-In Date	
	Security	FEES PAID	Application
	\$	\$	
	Lease Term	Monthly Rent	
	mo.	\$	
Concession			

YOUR AGENT: \_\_\_\_\_

DATE: \_\_\_\_\_

### APPLICANT

### SPOUSE

Full Name (Last, First, M.I.)		
Social Security Number		
Date of Birth		
Sex		
Marital Status	Married <input type="checkbox"/> Divorced <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Widowed <input type="checkbox"/>	
Gross Anticipated Annual Income		
Occupation		
Cars (Color/Make/Lic#/State/Year)		
Driver's License Number		
Contact Phone No. - Home/Cellular		
E-Mail address		
Pets <input type="checkbox"/> Yes <input type="checkbox"/> No	Size of Pet	
<b>Student Status</b>	Not a student <input type="checkbox"/> Full Time Student <input type="checkbox"/> Part Time Student <input type="checkbox"/>	Not a student <input type="checkbox"/> Full Time Student <input type="checkbox"/> Part Time Student <input type="checkbox"/>

### OTHERS TO RESIDE IN APARTMENT:

Full Legal Name	Social Security #	Relationship to Applicant	Date of Birth	Sex	Student	Income	Occupation

### APPLICANT

### SPOUSE

<b>PRESENT ADDRESS:</b>	<b>PRESENT ADDRESS:</b>
Street	Street
City/State/Zip	City/State/Zip
Monthly Payment	Monthly Payment
Rent <input type="checkbox"/> Own <input type="checkbox"/> Live with Family <input type="checkbox"/>	Rent <input type="checkbox"/> Own <input type="checkbox"/> Live with Family <input type="checkbox"/>
Dates	Dates
Landlord/Lender	Landlord/Lender
Phone	Phone

### APPLICANT

### SPOUSE

<b>PREVIOUS ADDRESS:</b>	<b>PREVIOUS ADDRESS:</b>
Street	Street
City/State/Zip	City/State/Zip
Monthly Payment	Monthly Payment
Rent <input type="checkbox"/> Own <input type="checkbox"/> Lived with Family <input type="checkbox"/>	Rent <input type="checkbox"/> Own <input type="checkbox"/> Lived with Family <input type="checkbox"/>
Dates	Dates
Landlord/Lender	Landlord/Lender
Phone	Phone

### APPLICANT

### SPOUSE

<b>CURRENT EMPLOYER APPLICANT:</b>	<b>CURRENT EMPLOYER SPOUSE:</b>
Name	Name
Address	Address
City/State/Zip	City/State/Zip
Date of Hire	Date of Hire
Work Phone	Work Phone
Position	Position
Annual Income	Annual Income
Supervisor	Supervisor

### APPLICANT

### SPOUSE

<b>PREVIOUS EMPLOYER APPLICANT:</b>	<b>PREVIOUS EMPLOYER SPOUSE:</b>
Name	Name
Address	Address
City/State/Zip	City/State/Zip
Work Phone	Work Phone
Date of Hire	Date of Hire
Ending date	Ending date
Position	Position
Annual Income	Annual Income
Supervisor	Supervisor

**ANNUAL INCOME**

Do you or your spouse have income from or expect to have income from:

			Applicant	Spouse	Total
Employment Income	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	\$
Overtime Pay	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	\$
Commissions/Fees	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	\$
Tips/Bonuses	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	\$
Income from Business	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	\$
Rental Income	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	\$
Social Security/Pensions	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	\$
Contributions from Friends or Family	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	\$
Scholarships/Grants/Work Study	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	\$
Unemployment benefits	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	\$
Worker's Compensation	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	\$
Child Support/Alimony	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	\$
TANF	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	\$
Mortgage Note Held	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	\$
Whole Life Insurance	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	\$
Other	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	\$

**ASSETS**

List all assets for you and your spouse and anyone under the age of 18.

Listing of All Assets			Cash Value	Annual interest or earnings from asset	Name of Financial Institution and/or Description of Asset
Checking Account(s)	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	
			\$	\$	
Savings Account(s)	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	
			\$	\$	
Stocks/ Bonds	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	
Mutual Funds	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	
IRA/401 K Account	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	
Trust Fund	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	
Whole Life Insurance	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	
Do you currently own a home or have you within the last two years?	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	
Other	yes <input type="checkbox"/>	no <input type="checkbox"/>	\$	\$	

**RELATIVE/EMERGENCY CONTACT (Not Living With You):**

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone \_\_\_\_\_

**RELATIVE/EMERGENCY CONTACT (Not Living With You):**

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 Phone \_\_\_\_\_

**By signing this application for residency I acknowledge the following:**

1. A credit, eviction, and criminal background check will be done in order to qualify for residency.
2. I have received, read, and understand the resident selection policy for the property at which I am applying.
3. The information contained in this application is true and complete. Material misrepresentation on this Application will constitute a default under the Lease or Rental Agreement Between the parties.
4. All information provided by applicant will be kept confidential.
5. I hereby authorize the release of the information requested, including release of information by any bank or savings and loan, employer (present and former), and any Lender.
6. Application must be signed before it can be processed by Management.
7. HOLD FEE: I hereby make a deposit \$\_\_\_\_\_ with Management as a HOLD FEE in connection with this rental application. If my application is accepted, I understand this HOLD FEE will be applied toward payment of my move in costs when I take possession of the apartment and sign the lease. If for any reason Management decides to decline my application, the Management will refund this HOLD FEE to me in full. I understand I may cancel this application by written notice within 48 hours and receive a full refund on this HOLD FEE within 30 days of cancellation. If I cancel after 48 hours or refuse to occupy the premises on the agreed upon date I understand this HOLD FEE will be NON-REFUNDABLE.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

Co-Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

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