

American Property Management, Inc.

Criminal Criteria Addendum

I, _____ have read and understand the
(Please Print Name)

Criminal Criteria under American Property Management, Inc. policies on this _____
day of _____, 20__ .

By signing this, I am in complete understanding that American Property Management,
Inc. may, at its discretion terminate my lease if at any future date it has been
determined that I have violated the Criminal Criteria, intentionally or unintentionally.

(Please sign Name)

(Date)

AUTHORIZATION

I do hereby authorize APMI *and its*
staff or authorized representative to contact any employers, financial institutions,
agencies, local police departments, offices, groups or other organizations to obtain and
verify any information or materials which are deemed necessary to determine my
eligibility for housing in programs administered/managed.

Applicant/Resident Signature

Print Name

Date

APPLICATION TO RENT 9/24/07

Please print clearly - Illegible information may cause delays in processing your application

COMMUNITY RENTAL INFORMATION	Community: _____ Apt #: _____ Rent \$: _____ Date Desired: _____ Apt Size: _____ Specials/Concessions: _____ Housing Voucher \$ _____ This section for Office use only How did applicant hear about our property? _____
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Main Applicant _____ Co-Signer _____ Other _____ List: _____
 If applying with other roommates, that are not existing tenants, please list their names: _____
 Add-on Roommate to existing tenant **ALL ADULTS must fill out a separate Application and pay a separate Screening Fee**

Applicant Information	Name: _____ <small style="display: flex; justify-content: space-between; width: 100%;"> Last First M.I. </small> Social Security Number: _____ - _____ - _____ Birth Date: _____ Driver's License #: _____ State of Issue: _____ Phone: (____) _____ Have you gone by any other names? YES NO (Please circle one) If yes, please list: _____
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Other Occupants – Please list any minor children who will be residing in the unit: _____

Automobile Make: _____ Model: _____ Year: _____ License Number: _____
 Emergency Contact: _____ Relationship: _____ Phone Number (____) _____
 Permission for Emergency contact to enter in emergency: YES NO

CRIMINAL CRITERIA

PLEASE CIRCLE THE APPROPRIATE ANSWER ON THE FOLLOWING QUESTIONS:

Applicant: Have you ever been convicted of a crime? **Yes No** Do you have any pending or outstanding warrants or charges? **Yes No**

Other occupant(s): Have you ever been convicted of a crime? **Yes No** Do you have any pending or outstanding warrants or charges? **Yes No**

IF ANY OCCUPANT ANSWERED YES TO ANY OF THE ABOVE QUESTIONS, THE FOLLOWING MUST BE COMPLETED:

1) What, specifically, were you charged with? _____ 2) Was it a felony or misdemeanor? _____
 3) What Class: A, B or C? _____ 4) How did you plea? _____ 5) What was your exact conviction/sentencing or parole date, whichever is later? _____

RESIDENCE HISTORY	IT IS THE APPLICANT'S RESPONSIBILITY TO ENSURE ALL INFORMATION IS CORRECT AND COMPLETE. MISSING OR INCOMPLETE INFORMATION IS GROUNDS FOR REJECTION. WE MUST HAVE TWO (2) YEARS OF CONSECUTIVE RENTAL HISTORY DISCLOSED.
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CURRENT ADDRESS	PREVIOUS ADDRESS	FORMER ADDRESS
Street Number Name Apt# _____ City State Zip Code _____ Check one of the following: Rent ___ Mortgage/Own ___ No rent paid ___ If Rented, amount of Rent Paid: \$ _____ Moved In: _____ Moved Out: _____ Reason for leaving: _____ Landlord's Information: Name: _____ Ph:(____) _____	Street Number Name Apt# _____ City State Zip Code _____ Check one of the following: Rent ___ Mortgage/Own ___ No rent paid ___ If Rented, amount of Rent Paid: \$ _____ Moved In: _____ Moved Out: _____ Reason for leaving: _____ Landlord's Information: Name: _____ Ph:(____) _____	Street Number Name Apt# _____ City State Zip Code _____ Check one of the following: Rent ___ Mortgage/Own ___ No rent paid ___ If Rented, amount of Rent Paid: \$ _____ Moved In: _____ Moved Out: _____ Reason for leaving: _____ Landlord's Information: Name: _____ Ph:(____) _____

EMPLOYMENT HISTORY	INFORMATION ON EMPLOYMENT HISTORY MUST BE COMPLETE AND ACCURATE IN ORDER TO VERIFY INCOME. PLEASE LIST PHONE NUMBER OF PERSON TO VERIFY EMPLOYMENT.
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PRESENT EMPLOYER	PREVIOUS EMPLOYER	FORMER EMPLOYER
Name of Company or Employer _____ Phone#:(____) _____ Position: _____ Gross Monthly Earnings: \$ _____ Start Date: _____	Name of Company or Employer _____ Phone#:(____) _____ Position: _____ Gross Monthly Earnings: \$ _____ Start Date: _____ End: _____	Name of Company or Employer _____ Phone#:(____) _____ Position: _____ Gross Monthly Earnings: \$ _____ Start Date: _____ End: _____

Other Monthly Income: \$ _____ Source: _____ How to Verify: _____

MISCELLANEOUS INFORMATION	Do you have any pets or do you intend to get any pets? YES NO If yes, what kind: _____ Have you filed for bankruptcy within the past 10 years? YES NO If yes, we will need the Discharge or Dismissed papers (whichever applicable). Are you now or will you be in the next year a Full Time Student? YES NO If yes, number of credit hours: _____
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I (we) declare the information given on this application to be true under penalty of perjury. Applicants hereby grant permission to the Owner/Manager and/or agents and A.P.M. Inc. to obtain credit reports and any other information necessary to verify all information on this application. I (we) agree that no other person or persons except the above named will occupy the subject premises at any time without the written consent of the Manager. I (we) further agree that all adults residing in the premises are jointly and severally liable for all rent and damage incurred during the term of occupancy. I (we) understand I (we) acquire no rights to this rental unit until an agreement is signed in the form submitted to me, and a security deposit of \$ _____ is paid. All adult tenants must sign the Rental Agreement. I (we) also understand that if I (we) do not rent and have paid a security deposit, \$ _____ will be withheld from the deposit for liquidating damages. If Management declines to accept this application, and I (we) have paid the security deposit, it will be refunded in full. Applicant(s) agrees to pay a Non-Refundable application processing fee of \$ _____.

Applicant's Signature: _____ Date: _____
 Manager's Signature: _____ Date: _____