

**SUNBURST MANAGEMENT
& REALTY SERVICES, INC.**

APPLICATION FOR RENTAL CONTRACT

DATE COMPLETED _____
(Each adult co-resident must complete a separate application.)

Personal Information

Name of Applicant			Telephone No.		Date of Birth		Social Security No.	
Present Address				How Long	Marital Status S <input type="checkbox"/> M <input type="checkbox"/>	No. of people to live in Apt.		Drivers License No.
City		State		Zip Code		Applicant's Gross Mo. Income		
			Spouse/Co-Residents Gross Mo. Income					
Present Landlord or Apt. Community				Mthly Rent or Mortgage \$		Telephone No.		How Long Lived There
Previous Address (if less than 2 yrs) List on back if needed				Mthly Rent or Mortgage \$		Telephone No.		How Long Lived There
Make of Car	Year	Lic. Plate No.	State	City		State	Zip Code	What year(s)
List all other vehicles (include motorcycles)						Pet(s) : Dogs <input type="checkbox"/> Qty Yes <input type="checkbox"/> No <input type="checkbox"/>	Cats <input type="checkbox"/>	
Name of Spouse				Date of Birth		Social Security No.		
List Names and Ages of all other persons who will occupy Apartment, including all children								

Employment

Name of Employer		Supervisor		Type of Work			How Long?	
Address		City		State		Zip Code	Telephone	
Former Employer				Type of Work			How Long?	
Address		City		State		Zip Code	Telephone	
Does Spouse Work? Name of Employer				Type of Work			How Long?	
Spouse Work Address		City		State		Zip Code	Telephone	

Emergency Information

Name
Street Address
Telephone (1)
Telephone (2)
Relationship

Why are you leaving your present residence? _____

Why did you choose to rent at our community? _____

Have you or your co-resident(s) ever been evicted? Yes___ No___

Have you or your co-resident(s) ever been convicted of, or plead guilty or no contest to, any felony criminal offense? Yes___ No___

Have you or your co-resident(s) ever broken a rental agreement or lease contract? Yes___ No___

Have you or your co-resident(s) ever been sued for non-payment of rent or damages to rental property? Yes___ No___

How were you referred to us? (Check Response)	Drive By _____	Internet (Site) _____	Newspaper (Name) _____	Yellow Pages _____	Friend (Name) (Referral) _____	Company Referral (Name) _____	Radio / TV _____	Other _____
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CORRECT INFORMATION - Applicant certifies that all responses made by Applicant in this Application are true, correct and complete. Applicant acknowledges that providing false information or omitting material facts may constitute grounds for rejection of this Application, termination of right of occupancy and/or forfeiture of deposits and may constitute a criminal offense under the laws of this State.

CONSENT TO OBTAIN A CONSUMER REPORT - Applicant understands that a background check (Consumer Report) will be obtained for purposes of verifying Applicant has provided to Apartment Management in this Application. Applicant authorizes Apartment Management to obtain a Consumer Report and, to the extent permitted by law, make any inquiry into Applicant's credit history, motor vehicle driving record, criminal and civil records, as well as other public record information. Applicant understands that inquiries may include any incidents of dishonesty, violence or drug-related offenses. Applicant releases Apartment Management, the apartment owner, their affiliates, subsidiaries, partners, directors, officers, employees, and agents from any all liability that may result from making such investigations.

OCCUPANCY DEPOSIT AGREEMENT- Applicant has deposited an "Occupancy Deposit" in the amount of \$_____ in consideration of Apartment Management taking the intended dwelling unit off market while considering approval of this Application. If Applicant is approved by Apartment Management, the Occupancy Deposit shall be credited to the required first month's rent. The Occupancy Deposit will be refunded only if Applicant is not approved. If Applicant refuses to enter into a rental contract or Lease with Apartment Management, the Occupancy Deposit shall be retained by Apartment Management as liquidated damages and not as a penalty.

Keys will be furnished only after a lease and other rental documents have been properly executed by all parties and applicable rents and security deposits have been paid.

This Application is preliminary only and does not obligate Apartment Management to execute a lease or deliver possession of any unit

Bldg. _____ Apt.No. _____ Apt. Type _____ Move-In Date _____ Term of Lease _____ Rent Amount \$ _____

For Office Use Only	
APPLICATION FEE	\$ _____
OCCUPANCY DEPOSIT	\$ _____
SECURITY DEPOSIT	\$ _____
PET DEPOSIT	\$ _____
LESS MONIES PAID	\$ _____
TOTAL DUE AT MOVE-IN	\$ _____
RECEIVED BY:	_____

I HAVE CAREFULLY READ THIS APPLICATION AND THE "STATEMENT OF RENTAL POLICY", AND I AGREE WITH THEIR TERMS AND CONDITIONS.

APPLICANT'S SIGNATURE DATE



SPOUSE'S SIGNATURE DATE

FOR OFFICE USE ONLY	
1. Credit check complete	Yes___ No___
Comments _____	Score _____
2. Present residence verified	Yes___ No___
Comments _____	Score _____
3. Present employment verified	Yes___ No___
Comments _____	Score _____
4. Income Verified	Yes___ No___
Comments _____	Score _____
5. Criminal Background complete	Yes___ No___
Comments _____	Score _____
Applicant: Accepted / Rejected	
Date Applicant Notified: ___/___/___ By: _____	
Completed by: _____ Approved by: _____	
If this Application was disapproved, what was the basis for refusal?	
<input type="checkbox"/> Unfavorable Credit Report	
<input type="checkbox"/> Unfavorable Report from Previous Landlord	
<input type="checkbox"/> Employment Verification	
<input type="checkbox"/> Incorrect Information submitted on Application	
<input type="checkbox"/> Number of Occupants	
<input type="checkbox"/> Other / Specify: _____	