

APPLICATION FOR RESIDENCY

Rental Application for Resident and Occupants

Community: _____ Apartment # _____ Rent \$ _____ Leasing Specialist: _____

Each co-resident and each occupant over 18 years old must submit a separate application.

Date filled out: _____

ABOUT YOU: Full name
(exactly as on driver's license or government ID card)

Former last name (maiden & married): _____

Your Social Security #: _____

Driver's license # & state: _____

OR government photo ID card #: _____

Birth date: _____

Current address where you live: _____

Current Rent: _____

Phone: _____

Email: _____

Name of apartment where you now live: _____

Current owner or manager's name: _____

Their phone: _____ Date moved in: _____

Why are you leaving your present residence: _____

Your previous home address: _____

City/State/Zip: _____

Apartment name: _____

Name of above owner or manager: _____

Their phone: _____

Previous Monthly rent: \$ _____

Date you moved in: _____ Date you moved out: _____

MUST INCLUDE 2 YEARS VERIFIABLE RESIDENCE

YOUR WORK:

Present employer: _____

Address: _____

City, State, Zip: _____

Work phone: () _____

Position: _____

Your gross monthly income is over: _____

Date you began this job: _____

Supervisor's name: _____

Supervisor's phone #: _____

Previous employer: _____

Address: _____

City, State, Zip: _____

Work phone: () _____

Position: _____

Your gross monthly income is over: _____

Date you began this job: _____

Supervisor's name: _____

Supervisor's phone #: _____

MUST INCLUDE 2 YEARS VERIFIABLE EMPLOYMENT

OTHER OCCUPANTS: Full names of all persons under age 18 and other adults who will occupy the unit and sign form.

NAME	DL or GOVT ID CARD	SOCIAL SECURITY #	BIRTH DATE	SEX	RELATIONSHIP

YOUR VEHICLES: List all vehicles to be parked by you, your spouse, or any occupants (including cars, trucks, motorcycles, RV's, campers, boats, etc.) Continue in margin.

MAKE, MODEL & COLOR OF VEHICLE(S)	YEAR	LICENSE #	STATE

EMERGENCY:

(Emergency contact person over 18 who will not be living with you.)

Name: _____

Address: _____

City/State/Zip: _____

Phone/Work #: _____

Relationship: _____

If you are seriously ill, missing, or in a jail or penitentiary according to an affidavit of the above person, or if you die you authorize (check one or more) _____ the above person, _____ your spouse and/or your parent to enter our dwelling to remove and store all contents as well as your property in the mailbox, storerooms and common areas. If you are seriously ill or injured, you authorize us to send for an ambulance at your expense. We're not legally obligated to do so.

OTHER INFORMATION:

Will you or any other occupant have a pet?

_____ Yes _____ No

If so, please indicate the type, weight, breed and age:

NOTE: Keeping pets requires consent of management, payment of applicable fees/deposits, and execution of Pet Addendum.

How were you referred? _____

Name of broker, internet site, publication:



YOUR RENTAL/CRIMINAL HISTORY:

Have you or any occupant listed above ever:

_____ *Been evicted or asked to move out?*

_____ *Broken a rental agreement or apartment lease?*

_____ *Declared bankruptcy?*

_____ *Been sued for non- payment of rent?*

_____ *Been sued for damage to rental property?*

_____ *Been convicted of a felony?*

_____ *Received deferred adjudication for a felony?*

_____ *Pleaded Guilty of “No Contest” to a Misdemeanor or Felony
Involving Sexual Misconduct? If so, name State: _____*

Please indicate the year, the type and location of each felony. We may need to discuss more facts before making a decision:

You requested (?) the answer is “yes” to any item not checked above.

ARE YOU LEGALLY ELIGIBLE TO LIVE IN THE UNITED STATES: (Please check one)

☐ Yes, I am a U.S. Citizen

☐ Yes, I have valid documentation from the U.S. Immigration and Naturalization Service (INS) that allows me to be in the country;
List source of documentation_____. List ID #_____.

If you have an Individual Tax ID #, please provide in the following space_____.

DEPOSIT, CREDIT REPORT, CRIMINAL BACKGROUND CHECK & RENTER’S INSURANCE

The undersigned warrants and represents the information on this rental application to be true and correct. Management relies upon the accuracy of the information contained in this application in determining whether to approve or reject your application. The terms of this application are deemed to be incorporated in the lease if the application is approved and if the applicant misrepresents any information in this application then this misrepresentation will be deemed a material and non-curable breach of the lease, which will result in a termination of the lease. I hereby leave \$_____ with Roseland Management Company in the form of a check or money order in connection with this application for residency. Of this amount, \$_____ is a non-refundable payment for processing this application and \$ _____ is for the Amenity Fee, which is per lease term. The remainder, \$_____ is a good faith deposit in connection with this application. If this application is approved, I understand that the good faith deposit will be applied as my Security Deposit. If the application is denied, the good faith deposit will be returned in full. If this application is approved, you will be offered the opportunity to sign a lease. If you do not sign a lease within three (3) business days of being notified of the approval of this application then the approval of this application and the offer to lease may be deemed automatically withdrawn and a portion, up to and including the entire deposit, which will be calculated on a per-diem rate based on your total monthly rental amount, will be retained by Roseland Management Company as liquidated damages, it being mutually agreed that actual damages may be hard to determine. You will then have to reapply if you wish to lease an apartment.

The undersigned acknowledges that a credit report will be secured for all applicants to verify account credit ratings and you hereby give your consent to Roseland Management Company to the fullest extent permitted by law to obtain a credit report on you. The results will be entered into the credit-scoring model, which determines applicant eligibility to rent and security deposit level (as applicable). Unfavorable accounts, which will negatively influence this score, include, but are not limited to: late payment history, collection, charge off, repossession and current delinquency.

The undersigned acknowledges that a criminal background check may be conducted for each applicant and you hereby give your consent to Roseland Management Company to the fullest extent permitted by law to obtain a criminal background check on you. The criminal search will be run for all addresses at which the applicant(s) has resided.

The undersigned further acknowledges that Roseland Management Company may obtain references from your prior landlord(s) your current and former employer(s) and you hereby give your consent to Roseland Management Company to the fullest extent permitted by law to obtain references from your prior landlord(s) and from your current and former employer(s).

Roseland Management Company requires you to maintain renter’s insurance. The landlord does not cover your personal property and/or liability. Coverage is available through licensed agents and starts the day after you enroll or any future date that you select. Proof of the policy matching the lease term must be submitted prior to move-in and at each renewal, naming the landlord as additional insured. The policy must provide that Roseland Management Company will be notified at least ten (10) days before the policy is cancelled for any reason. Maintenance of renter’s insurance is deemed to be a material and substantial term of your lease.

By signing this Application, you certify that all persons over eighteen (18) years of age who will be occupying the apartment home have completed and provided to us a separate Application of Residency, and that each such occupant will sign the Lease at the time required by us.

AGENCY DISCLOSURE (applicable for Virginia applicants only)

Roseland Management Company and its leasing specialists have been retained by the owner of the community in which you apartment is located as its representative for management and leasing services. Manager owes fiduciary duties such as loyalty and faithfulness to the owner. As our resident, we want you to understand that an agency relationship exists between us and the owner. Under applicable law, prompt disclosure in writing of agency relationships to all actual and prospective parties to a transaction at the earliest practical time is encouraged and/or required. Each party should carefully read all documents pertaining to any real estate transaction. Should you have any questions, please let us know and we will gladly answer them. By signing below, applicant acknowledges that he or she has read and has received a copy of the Agency Disclosure.

Title VIII of the Civil Rights Act of 1968, as amended by the Fair Housing Amendments Act of 1988, prohibits discrimination in the rental of housing based on race, color, religion, sex, handicap, familial status or national origin. The Federal Agency, which administers compliance with this law, is the U.S. Department of Housing and Urban Development, Washington, DC 20410.

EQUAL CREDIT OPPORTUNITY ACT

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of sex or marital status. The Federal agency, which administers compliance with this law concerning this company, is the Equal Credit Opportunity, Federal Trade Commission, Washington, DC 20680.

THE LEASE AGREEMENT WILL NOT BECOME EFFECTIVE UNTIL THIS APPLICATION IS APPROVED BY MANAGEMENT.

APPLICANT’S SIGNATURE AND DATE: _____

MANAGER’S SIGNATURE AND DATE: _____