

RENTAL APPLICATION

Thank you for your interest in our apartments. Please complete all requested information on both pages.

Property: _____ Date: _____ Size Desired: _____

Applicant(s): (Please Print Clearly)

Applicant #1 _____	Date of Birth: ____/____/____
Marital Status: _____	Social Security Number: ____-____-____
Driver's License Number: _____	#of Dependents: _____
Applicant #2 _____	Date of Birth: ____/____/____
Marital Status: _____	Social Security Number: ____-____-____
Driver's License Number: _____	#of Dependents: _____

Please tell us how you heard about our apartment.

Apartment Guide
 Drive-By
 Newspaper
 Referred by Friend/Employer
 Other (Please Specify) _____

Current Address _____ City _____ State _____ Zip _____

From ____/____/____ To ____/____/____ Apartment Name or Mgmt Company _____

Monthly Rent _____ Phone: () _____ - _____ Reason for Moving _____

Previous Address _____ City _____ State _____ Zip _____

From ____/____/____ To ____/____/____ Apartment Name or Mgmt Company _____

Monthly Rent _____ Phone: () _____ - _____ Reason for Moving _____

Person (s) to Occupy Apartment (Other than Applicant)

Full Legal Name	Age	Relationship	Social Security Number
_____	_____	_____	_____
_____	_____	_____	_____

Employment History

Applicant #1: Current Employer _____ Position _____

Address _____ City _____ State _____ Zip _____

Phone# () _____ - _____ Supervisor _____ Monthly Salary _____

Dates of Employment From ____/____/____ To ____/____/____ Miles from Work _____

Applicant #2: Current Employer _____ Position _____

Address _____ City _____ State _____ Zip _____

Phone# () _____ - _____ Supervisor _____ Monthly Salary _____

Dates of Employment From ____/____/____ To ____/____/____ Miles from Work _____

Additional Sources of Income (i.e., Part-time job, pension, child support, etc.)

Amount	Type	Received From	Phone #
_____	_____	_____	_____
_____	_____	_____	_____

Bank Account(s)

Name _____	Account # _____	City/State/Zip _____	Type of Acct _____
Address _____	_____	_____	_____
Name _____	Account # _____	City/State/Zip _____	Type of Acct _____
Address _____	_____	_____	_____

Automobile(s)

Make _____	Model _____	Year _____	Color _____	_____
License Plate #/ State _____	Monthly Payment _____	Account # _____	_____	_____
Paid To _____	Address _____	_____	_____	_____
Make _____	Model _____	Year _____	Color _____	_____
License Plate #/ State _____	Monthly Payment _____	Account # _____	_____	_____
Paid To _____	Address _____	_____	_____	_____

References

Name of nearest relative not living with you: _____

Relationship _____ Phone # () _____ - _____

Emergency Contact Name: _____ Phone #: () _____ - _____

Address _____ City/State/Zip _____

What attracted you to these apartments? _____

Have you ever been evicted? _____ If yes, Landlord's Name _____

Phone # () _____ - _____ Date of Eviction: ____/____/____

Have you ever been convicted of a felony offense? _____

Desired Move-In Date ____/____/____ Type of Apartment _____ Apartment # _____

Agreed Rent Amount \$ _____ Security Deposit \$ _____

1) I HEREBY APPLY FOR AND OFFER TO LEASE THE APARTMENT DESCRIBED HEREIN FOR THE LEASE TERM STATED, AT THE RENTAL AND UPON THE TERMS AND CONDITIONS SET FORTH HEREIN AND IN LESSOR'S STANDARD LEASE FORM. I WARRANT THAT ALL OF THE REPRESENTATIONS IN THIS APPLICATION ARE TRUE AND CORRECT.

2) UNDERSTAND THAT OCCUPANCY OF THE APARTMENT IS LIMITED TO PERSONS LISTED ABOVE UNDER "PERSON TO TO OCCUPY APARTMENT". I UNDERSTAND THAT IF CHILDREN ARE OCCUPANTS OF THE PREMISES IT IS MY RESPONSIBILITY TO SUPPLY ADEQUATE SUPERVISION AT ALL TIMES.

3) SIMULTANEOUSLY WITH THE EXECUTION OF THE APPLICATION I AM MAKING A DEPOSIT IN THE SUM OF \$_____ PLUS \$_____ CHARGE FOR AN INVESTIGATIVE REPORT. IT BEING UNDERSTOOD THAT THE CHARGE FOR THE INVESTIGATIVE REPORT IS NOT REFUNDABLE. UPON EXECUTION OF THE LEASE BY ME IT IS UNDERSTOOD THAT THIS DEPOSIT WILL BE RETAINED BY THE LESSOR AND APPLIED TO THE SECURITY DEPOSIT UNDER THE TERMS AND CONDITIONS CONTAINED IN THE LEASE... IT IS FURTHER UNDERSTOOD THAT AT THE TIME I EXECUTE THE LEASE ON THE PREMISES I WILL PAY THE FIRST MONTH'S RENTAL AND THE BALANCE OF THE SECURITY DEPOSIT. I UNDERSTAND THAT A COVENANT OF THE LEASE REQUIRES RENTAL PAYMENTS ON OR NEAR THE FIRST DAY OF EACH AND EVERY MONTH IN ADVANCE . \$50.00. PER FAMILY CREDIT CHECK. IF TWO OR MORE UNRELATED, CREDIT CHECKS ARE \$50.00 PER CREDIT CHECK.

4) I AGREE THAT THE LESSOR MAY RETAIN SAID DEPOSIT AS LIQUIDATED DAMAGES FOR ITS COSTS AND EXPENSES, AND NOT AS A PENALTY, IF ANY OF THE REPRESENTATIONS MADE BY ME ARE FALSE. I FURTHER AGREE THAT MY DEPOSIT IS NON-REFUNDABLE (EXCEPT FOR THE PROVISION OF PARAGRAPH 5 HEREIN) AND THE DEPOSIT WILL BE RETAINED IF I DO NOT EXECUTE A LEASE FOR THE APARTMENT DESCRIBED WITHIN (72) HOURS.

5) I UNDERSTAND THAT LESSOR WILL REFUND SAID DEPOSIT TO ME IF THE APARTMENT SPECIFIED (OR ANY OTHER APARTMENT MUTUALLY AGREE UPON) IS NOT AVAILABLE, OR IF THIS APPLICATION IS REJECTED BY THE LESSOR FOR ANY REASON.

6) I UNDERSTAND THAT I ACQUIRE NO ON ANY APARTMENT UNTIL I SIGN A LEASE IN THE FORM SUBMITTED TO ME: UNTIL ALL MONIES ARE PAID TO THE LESSOR AS SET FORTH ABOVE; AND THE LEASE IS EXECUTED BY LESSOR.

7) AS IS CUSTOMARY IN BUSINESS, I UNDERSTAND THAT ROUTINE INQUIRIES MAY BE MADE WITH RESPECT TO MY TENANCY. IN COMPLIANCE WITH THE FAIR CREDIT REPORTING ACT, I UNDERSTAND THAT AN INVESTIGATIVE CONSUMER REPORT WILL BE MADE WHICH MAY INCLUDE INFORMATION AS TO MY CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTIC AND MODE OF LIVING. THE NATURE AND SCOPE OF THE INVESTIGATION REQUESTED MAY INCLUDE INFORMATION OBTAINED THROUGH PERSONAL INTERVIEWS CONCERNING RESIDENCE VERIFICATION, MARITAL STATUS, NUMBER OF DEPENDANTS, EMPLOYMENT, OCCUPATION, HABITS, REPUTATION AND MODE OF LIVING.

8) I UNDERSTAND THAT MY APPLICATION MAY BE REJECTED IF DURING THE INVESTIGATION THERE ARE FOUND TO BE JUDGEMENTS, LINE'S, OR BANKRUPTCY IN MY PERSONAL CREDIT HISTORY.

9) I AGREE TO SUBMIT TO LESSOR A VALID PHOTO IDENTIFICATION (SUCH AS A STATE SOCIAL SECURITY CARD WHICH WILL BE PHOTDRIVER'S LICENSE) AND OCCOPIED AND MADE PART OF THIS APPLICATION.

10) WATERBEDS AND/ OR PETS ARE NOT ALLOWED WITHOUT PRIOR WRITTEN AUTHORIZATION. DO YOU HAVE A PET? YES_____NO_____ DO YOU HAVE A WATERBED? YES_____NO_____

FOR OFFICE USE ONLY

OCCUPANCY DATE _____
APARTMENT UNIT _____

X _____
APPLICANTS SIGNATURE

1. RENT PER MONTH: _____

_____ APPLICANTS SIGNATURE

2. OTHER MONTHLY CHARGES: _____

3. TOTAL MONTHLY CHARGES: _____

4. NON-REFUNDABLE PET FEE: _____

_____ LEASING AGENTS SIGNATURE

5. NON-REFUNDABLE REDEC FEE: _____

APPLICATION & REDEC. FEE PAID:
CHECK ___ CASH ___ M/O ___ OTHER ___

6. PRORATED RENT DUE: _____

APPROVAL DATE: ___ / ___ / ___
DISAPPROVAL DATE: ___ / ___ / ___

7. SECURITY DEPOSIT: _____

8. TOTAL AMOUNT: _____

_____ PROPERTY MANAGER'S SIGNATURE

9. NONREFUNDABLE CREDIT: _____

10. BALANCE DUE ON ACCEPTANCE: _____

THIS APPLICATION SHALL NOT BE CHANGED ORALLY BUT SHALL BE CHANGED ONLY BY WRITTEN AGREEMENT. ANY PROVISION NOT SET FORTH ABOVE MUST BE SHOWN IN WRITING BELOW.

R.K.M. MANAGEMENT CORPORATION
Statement of Rental Policy

Equal Housing: It is the policy of R.K.M. Management Corporation and this rental community to treat all current and prospective residents in a fair, professional manner without regard to color, religion, sex, familial status, handicap or national origin.

Rental Application: An application for occupancy must be completed and maintained for each legal adult who will be living in the apartment and contributing to the payment of rent. Any false information will constitute grounds for rejection and lease may be nullified.

Occupancy Guidelines: No more than two persons per bedroom in each floor plan.

Rental Criteria: Employment - Employment will be verified. At a minimum, employment history should reflect six months with current employer and/or one year with previous employer. If length of employment is more than six months, the length of previous employment need not be met. Recent graduates must provide proof of enrollment or graduation. Self employed applicants must provide a financial statement from a CPA (Certified Public Accountant) or a previous years' tax return.

Co-Signers: A co-signer must satisfy the same employment requirements described above. Verifiable income shall include income as confirmed by an employer. Self employed persons must provide two years' prior tax returns.

Rental History: Applicant must provide twelve months of current, verifiable rental history or proof of home ownership. An applicant will not be approved if there is any outstanding balance due to any other apartment community or mortgage company. A positive record of prompt monthly payments, sufficient notice given to the community and no damage done to the apartment is expected. First time renters will be required to place a security deposit equal to one months' rent or have a qualified co-signer.

Credit History: 1. Your credit history must reflect that all accounts are current. 2. Credit is verified through Equifax Credit Services. Requirements include the following and must be verified: A credit rating of at least 1-1 or R-1. Credit ratings that include any liens, bankruptcies, judgments, evictions, or ratings above 1-5 (not to exceed 2) will require that security deposit payments be equal to one months' rent.

Identification Requirements: Two forms of identification must be given: a photo ID and a second form of identification are required.

Roommates: Each must qualify individually. Each roommate is fully responsible for the entire rental payment and each must execute the Lease Agreement and its supporting documents.

Pets: Pets are accepted with prior approval by management. Pets must not exceed 25 lbs. when full grown. A pet agreement must be signed and followed. Established pet fees and deposits must be paid prior to bringing the pet into the community. The pet policy is subject to limitations per the property's quota.

Security Deposit: A security deposit is required and is held as security for the residents' fulfillment of the conditions of the rental agreement.

Rental Payment: Monthly rental payments are due on or before the first day of each month. There will be a late fee assessed for all rent paid after the designated grace period. All returned checks will be assessed a service fee plus applicable late fees.

Resident

Date

Resident

Date

Application Criteria: Credit check to include Criminal & Eviction Report / Written verification of income equal to 2.5 times the base rent, which may fluctuate up or down within reason considering excellence of all other criteria / One year rental history.

Release of Information and Authorization for Verification of Application
Unmarried co-applicants must fill out a separate release

Name Last First MI Jr. Sr. Prior SS# - - - DOB / /

Spouse Last First MI Maiden SS# - - - DOB / /

Present Address Street Apt# City St Zip Code

Please provide a previous address if you have lived at your current address for less than 24 months

Previous Address Street Apt# City St Zip Code

Have you ever had an eviction filed against you?

Applicant: Yes No

Spouse: Yes No

Have you ever left owing money to any owner or landlord?

Applicant: Yes No

Spouse: Yes No

Have you applied for residency anywhere in the past 2 years, but did not move in?

Applicant: Yes No

Spouse: Yes No

Have you ever had adjudication withheld or been convicted of a crime?

Applicant: Yes No

Spouse: Yes No

IF YOU HAVE ANSWERED YES TO ANY OF THE ABOVE QUESTIONS PLEASE EXPLAIN IN DETAIL THE CIRCUMSTANCES REGARDING THE SITUATION ON THE BACK OF THIS SHEET.

Applicant(s) represents that all of the above statements information on the application for rental are true and complete, and hereby authorizes an investigative consumer report and verification of any and all information relating to residential history (rental or mortgage), employment history, criminal history records, court records, and credit records. Applicant acknowledges that false or omitted information herein may constitute grounds for rejection of this application, termination of occupancy, and/or forfeiture of fees or deposits and may constitute a criminal offense under the laws of this State. I/We hereby release ASAP and any of the above from any liability and responsibility arising from their doing so. Facsimiles of this authorization may be used to facilitate multiple inquiries. In the event you receive a facsimile of this authorization, it should be treated as an original and the requested information should be released to facilitate my/our application for residency.

Signature Applicant

Date

Signature Spouse

Date