

RENTAL APPLICATION

- 1. No residency is created by the signing of this application. Until a lease agreement is signed, all funds submitted with this application shall be regarded as holding funds and not as security deposit. Upon execution of a lease agreement said funds shall be considered security deposit, where applicable.
2. If accepted, Applicant will be notified of the acceptance of application within ten (10) days of the date of application.
3. Community Owner reserves the right to deny application. Upon request, Applicant will be advised of denial in writing and will receive a full refund of all monies paid as holding deposit within ten (10) days of application.
4. This application is for the specific unit stated on the face of this application. Upon acceptance, the unit will be reserved for Applicant, and that unit will be made available to Applicant as of the "beginning date". The initial rental term shall commence on said "beginning date" and shall extend to the "ending date" as stated in the face of this application. Community Owner and its agents shall not be liable if Applicant is unable to enter into and occupy the premises on the date specified, or for any reason not within the control of Community Owner or its agents (including delays due to construction, holding over by prior resident, etc.).
5. Upon notification by Community Owner, Applicant agrees to sign a lease agreement prepared in accordance with the terms of this application, and drawn upon the standard lease form used by Community Owner. The lease agreement is a contract between Applicant(s) and the owner of the property to be occupied.
6. Applicant(s) recognizes that all facilities are for the exclusive use of Residents of the Community. If accepted as a Resident, Applicant(s) agree to abide by the terms specified within the lease agreement, including all rules and regulations which may be made part of the lease agreement or set forth by Community Owner as Community Owner deems appropriate and necessary.
7. Community Owner shall not be obliged to keep the holding deposit as a separate fund. Applicant agrees that the full monthly rent (including Community-billed utility charges) are to be paid on or before the due date each month as stated within the lease agreement. The holding deposit may not be directed by Applicant as payment of rent.
8. Applicant understands that no employee or agent of Community Owner has the authority to modify the terms of this contract in any respect.

CANCELLATION PROCEDURE

- 1. Applications may be cancelled within five (5) days of the date of application, or until a lease agreement is signed, whichever occurs first. Notice of cancellation must be received in writing at the place of application during that time period. Applicant will receive a refund of all monies paid as holding deposit. Application fees are non-refundable.
2. Cancellations after five (5) days will be handled in the following manner: If after acceptance of the application the Applicant refuses to enter into a lease agreement for the unit reserved, the Applicant will also be responsible to Community Owner for loss of rent. This loss of rent will be equal to the rent for the unit from the "beginning date" and continuing to the "beginning date" for the next approved applicant for that unit. Community Owner will begin efforts to rent the unit to a new applicant as soon as notice of cancellation is received. Community Owner shall not assess a charge for loss of rent in excess of the holding deposit.

SIGN HERE

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

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

Application Notes \_\_\_\_\_

Finance source for home \_\_\_\_\_ Approved \_\_\_\_\_ Monthly payment \$ \_\_\_\_\_

Accepted by \_\_\_\_\_ Date \_\_\_\_\_ \*Rejected by \_\_\_\_\_ Date \_\_\_\_\_

\*Explanation of rejection \_\_\_\_\_

Community called by \_\_\_\_\_ Spoke to \_\_\_\_\_ Date \_\_\_\_\_

Employer called by \_\_\_\_\_ Spoke to \_\_\_\_\_ Date \_\_\_\_\_

Acceptance letter mailed to applicant(s) by \_\_\_\_\_ Date \_\_\_\_\_

Rejection letter mailed to applicant(s) by \_\_\_\_\_ Date \_\_\_\_\_

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FOR OFFICE USE ONLY

COMMUNITY NAME _____		SITE _____		SITE RENT \$ _____		KEY DEPOSIT \$ _____	
ADDRESS _____		PROPOSED _____		SECURITY \$ _____		OTHER \$ _____	
(IF ANY)		MOVE-IN DATE		DEPOSIT			
<b>PLEASE PRINT</b>							
APPLICANT NAME			DATE OF BIRTH			SOCIAL SECURITY NUMBER	
APPLICANT DRIVER'S LICENSE NUMBER							
PRESENT ADDRESS		CITY	COUNTY	STATE	ZIP	TELEPHONE NUMBER	
LENGTH OF TIME AT PRESENT ADDRESS		MONTHLY PAYMENT			IS PRESENT HOUSING A RENTAL?		
		\$ _____			YES _____ NO _____		
NAME OF COMPLEX		MANAGER/OWNER NAME			TELEPHONE NUMBER		
PREVIOUS ADDRESS		CITY	COUNTY	STATE	ZIP	LENGTH OF TIME AT THAT ADDRESS	
APPLICANT'S EMPLOYER (LETTER OF EMPLOYMENT REQUIRED)			POSITION			LENGTH OF EMPLOYMENT	
ADDRESS		CITY	STATE	ZIP	TELEPHONE NUMBER		
TYPE OF BUSINESS		SUPERVISOR		MONTHLY INCOME		NUMBER OF DEPENDENTS	
PREVIOUS EMPLOYER		ADDRESS			LENGTH OF EMPLOYMENT		
CO-APPLICANT NAME			DATE OF BIRTH			SOCIAL SECURITY NUMBER	
CO-APPLICANT DRIVER'S LICENSE NUMBER							
PRESENT ADDRESS		CITY	COUNTY	STATE	ZIP	TELEPHONE NUMBER	
LENGTH OF TIME AT PRESENT ADDRESS		MONTHLY PAYMENT			IS PRESENT HOUSING A RENTAL?		
		\$ _____			YES _____ NO _____		
NAME OF COMPLEX		MANAGER/OWNER NAME			TELEPHONE NUMBER		
PREVIOUS ADDRESS		CITY	COUNTY	STATE	ZIP	LENGTH OF TIME AT THAT ADDRESS	
CO-APPLICANT'S EMPLOYER (LETTER OF EMPLOYMENT REQUIRED)			POSITION			LENGTH OF EMPLOYMENT	
ADDRESS		CITY	STATE	ZIP	TELEPHONE NUMBER		
TYPE OF BUSINESS		SUPERVISOR		MONTHLY INCOME		NUMBER OF DEPENDENTS	
PREVIOUS EMPLOYER		ADDRESS			LENGTH OF EMPLOYMENT		
<b>OCCUPANT INFORMATION</b>							
NAME (LAST, FIRST)					RELATIONSHIP		
<b>HOME INFORMATION</b>							
PLEASE COMPLETE THE FOLLOWING INFORMATION REGARDING THE HOME YOU ARE GOING TO BUY OR WOULD LIKE TO BRING INTO THE COMMUNITY:							
ADDRESS				CURRENT OWNER(S)			
MAKE/YEAR	SERIAL NUMBER		SIZE		NUMBER OF BEDROOMS		
DEALER		SALESPERSON			TELEPHONE NUMBER		
FINANCED BY				TELEPHONE NUMBER			
PURCHASE PRICE				DOWN PAYMENT			
STATUS OF RESALE INSPECTION: COMPLETE _____ INCOMPLETE _____ (RESALE INSPECTION MUST BE COMPLETED BEFORE PAPERWORK IS FINALIZED)							
PHOTOGRAPHS MUST BE REVIEWED IF HOME IS BEING RELOCATED YES _____ NO _____ (MANAGEMENT MAY RETAIN PHOTOS UNTIL DETERMINATION IS REACHED)							
FOR YOUR PERSONAL SAFETY, A FIRE EXTINGUISHER(S) (2A 10 BC) AND SMOKE DETECTOR(S) ARE REQUIRED IN HOME. DO YOU HAVE THEM? YES _____ NO _____							
MANAGEMENT IS TO SEE PROOF OF HOME OWNERSHIP TRANSFER. PLEASE CONFIRM: YES _____ NO _____							

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CREDIT INFORMATION					
BANK REFERENCES	SAVINGS ACCOUNT NUMBER	BANK	ADDRESS	TELEPHONE NUMBER	
	CHECKING ACCOUNT NUMBER	BANK	ADDRESS	TELEPHONE NUMBER	
LIST BELOW DEBT WITH ALL CREDITORS, CREDIT CARDS (PAST AND PRESENT), FINANCE AND LOAN COMPANIES, BANKS, STORES, MEDICAL BILLS, INVESTMENT PURCHASES, AUTOMOBILE LOANS & ANY OBLIGATIONS OF ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE PAYMENTS. (ATTACH ADDITIONAL SHEETS IF NECESSARY.)					
CREDITORS	ADDRESS	PHONE	ACCOUNT NUMBER	BALANCE	MONTHLY PAYMENT
OTHER INCOME - YOU ARE NOT REQUIRED TO DISCLOSE INCOME FROM ALIMONY, CHILD SUPPORT OR SEPARATE MAINTENANCE PAYMENTS. HOWEVER, IF YOU ARE RELYING ON INCOME FROM ANY OF THESE SOURCES FOR PAYMENT OF THIS OBLIGATION, PLEASE EXPLAIN BELOW:					
ADDITIONAL MONTHLY INCOME		SOURCE(S)		IS INFORMATION ABOUT APPLICANT OR CO-APPLICANT (CIRCLE ONE)	
HAS APPLICANT OR CO-APPLICANT FILED FOR BANKRUPTCY WITHIN LAST 10 YEARS? YES _____ NO _____					
DO YOU HAVE ANY PETS? YES _____ NO _____ IF YES, WHAT TYPE, BREED & DESCRIPTION: _____					
EMERGENCY INFORMATION					
NOTIFY IN CASE OF AN EMERGENCY _____		RELATIONSHIP _____		ADDRESS _____ TELEPHONE # _____	
THANK YOU FOR APPLYING FOR RESIDENCY AT OUR COMMUNITY.					
We would like to know how you heard about us. Please take a few moments to let us know.					
<input type="checkbox"/> Referral by friend or relative <input type="checkbox"/> Newspaper ad (which paper?) _____ <input type="checkbox"/> Dealer referral (name?) _____ <input type="checkbox"/> TV/Radio (which station?) _____ <input type="checkbox"/> Sign or billboard (location?) _____ <input type="checkbox"/> Driving - By: _____ <input type="checkbox"/> Other _____					
I (we) hereby warrant to the truth of this RENTAL APPLICATION in its entirety. Further I (we) recognize that the falsification of information on this application may be grounds for denial of acceptance into this community; and for existing residents, reasonable grounds for eviction proceedings. I (we) authorize management to perform a credit history investigation to verify the above reported information pertaining to my (our) credit and financial responsibility. I (we) authorize management to use the above information to obtain a criminal background history as part of qualification for residency.					
APPLICANT(S) TO INITIAL APPROVAL    X _____ X _____					
APPLICANT'S SIGNATURE _____		CO-APPLICANT'S SIGNATURE _____		DATE _____	
ADDITIONAL OCCUPANTS SIGNATURE _____					
CREDIT VERIFICATION - OFFICE USE ONLY					
INSTRUCTIONS Please explain to applicant(s) that the RENTAL APPLICATION is to be completed by answering all the questions. Accept application dated and signed by all applicants with appropriate funds. CREDIT VERIFICATION to be completed in full and signed by the Community's Office Personnel.					
(1) CURRENT RESIDENT STATUS					
(2) EMPLOYER(S) CONFIRMED/COMMENTS					
(3) INCOME(S) VERIFIED					
(4) CREDIT HISTORY VERIFIED					
(5) CREDIT BUREAU RATING					
(6) CRIMINAL HISTORY VERIFIED					
(7) COMMENTS					
(8) APPROVED _____ NOT APPROVED _____					
DATE _____			COMMUNITY'S AUTHORIZED REPRESENTATIVE _____		

**SIGN  
HERE**