

DRUCKER & FALK REAL ESTATE

MULTIFAMILY • COMMERCIAL • SENIOR LIVING

Thank you for considering us in your search for a new apartment home.

DATE OF APPLICATION _____

NAME OF APPLICANT _____

NAME OF SPOUSE _____

APARTMENT DESIRED _____

DATE DESIRED _____ LEASE TERM DESIRED _____

APPLICATION FEE PAID _____ (non-refundable)

*HOW DID YOU HEAR ABOUT US? _____

A HOLDING FEE IS REQUIRED TO RESERVE AN APARTMENT.

THIS FEE CAN BE RETURNED TO YOU ONLY IF THE APPLICATION IS NOT APPROVED.

OUR COMMUNITY INSURANCE POLICY DOES NOT COVER DAMAGE BY FIRE, WATER, OR ANY OTHER CAUSE TO A RESIDENT'S PERSONAL PROPERTY LOCATED IN THE APARTMENT OR ANYWHERE ON THE COMMUNITY PROPERTY. EACH RESIDENT IS RESPONSIBLE FOR OBTAINING INSURANCE COVERAGE. ADDITIONALLY, SOME COMMUNITIES REQUIRE LIABILITY COVERAGE AS A REQUISITE OF THE LEASE.

With your best interest in mind, the following information is necessary.



APPLICANT INFORMATION

(EACH ADULT APPLICANT MUST SUBMIT A SEPARATE UPDATE FORM UNLESS MARRIED)

Applicant Full Name (First, Middle, Last) _____

Date of Birth _____ SS# _____ DL#/State _____

Spouse Full Name (First, Middle, Last) _____

Date of Birth _____ SS# _____ DL#/State _____

Other Occupants

1) Name _____ Relationship _____ Date of Birth _____

2) Name _____ Relationship _____ Date of Birth _____

3) Name _____ Relationship _____ Date of Birth _____

4) Name _____ Relationship _____ Date of Birth _____

RESIDENCY

Current Home Address _____

City, State, Zip _____ Home Phone _____

Date Moved In _____ Rent/Mortgage \$ _____ per _____

Apt Community/Owner _____ Mgr/Owner Phone (____) _____

Previous Home Address _____

City, State, Zip _____ Rent/Mortgage \$ _____ per _____

Move-In Date _____ Move-Out Date _____

Apt Community/Owner _____ Mgr/Owner Phone (____) _____

EMPLOYMENT

Applicant's Employer _____ Employer Phone (____) _____

Employer's Address _____

Occupation _____ Gross Monthly Income _____

Spouse's Employer _____ Employer Phone (____) _____

Employer's Address _____

Occupation _____ Gross Monthly Income _____

VEHICLES (INCLUDE RECREATIONAL VEHICLES)

Auto Make _____ Year _____ Color _____ Tag# _____ State _____

Auto Make _____ Year _____ Color _____ Tag# _____ State _____

Auto Make _____ Year _____ Color _____ Tag# _____ State _____

EMERGENCY CONTACT (Person over age 18 to contact in case of emergency – someone not living with you)

Name _____ Relationship _____

Address (Street, City, State, Zip) _____

Work Phone (____) _____ Home Phone (____) _____

IMPORTANT TO APPLICANT

- 1- Are you a pet owner? _____ Type/Breed _____ Weight _____ Age _____
No animal is allowed on the premises without prior written consent from management.
- 2- Do you have renter's insurance? _____ Company _____
(Personal property insurance coverage may be required. Consult with management.)
- 3- A full month's rent is due at move-in. Prorated rent, if applicable, is due the first day of the following month. Move-ins the 25th or later require payment of prorated rent as well as the full month's rent.
- 4- The lease effective date is final. If the applicant fails to move in on that date, rent will still be charged from the lease effective date.

SELECTION CRITERIA

Income: Income and employment will be verified on each applicant. Monthly income must meet the minimum requirements for the community for which the application is submitted.

Rental History: Two years of residential history will be verified on each applicant. Applicant's name must have been on the Lease/Mortgage for any reference to be valid. Rental references should reflect the applicant's ability and willingness to comply with Lease terms as well as community policies and guidelines. Lack of rental history will not be considered a negative factor.

Credit: Credit information on each applicant will be obtained through one or more Consumer Reporting Agencies. Credit history should positively reflect the applicant's ability and willingness to make payments as required by the Lease.

Public Records/Criminal Background: A public records search will be conducted on each adult occupant. Any one or more of the following will result in automatic denial of the application.

- All Felonies including convictions, probation, deferred adjudication, court-ordered intervention programs and pending cases.
- All Misdemeanors convictions, probation, deferred adjudication, court-ordered intervention programs and pending cases for sexual misconduct.
- All Misdemeanors including convictions, probation, deferred adjudication, court-ordered intervention programs and pending cases for the following types of misdemeanors: illegal possession, manufacture, sale, and/or distribution of a controlled substance; or involving a physical crime against a person or persons and/or another person's property with less than seven (7) years time lapse since date of sentence completion.

Occupancy Standards: Occupancy limits, determined by the community, may not be exceeded.

SIGNATURE OF ALL ADULTS TO APPEAR ON LEASE

I CERTIFY THE INFORMATION PROVIDED ON THIS APPLICATION IS ACCURATE TO THE BEST OF MY KNOWLEDGE. I AUTHORIZE INQUIRIES TO BE MADE BY ALL AVAILABLE MEANS TO VERIFY THE STATEMENTS ABOVE. THIS WOULD INCLUDE, BUT NOT BE LIMITED TO, CONSUMER REPORTING AGENCIES, PUBLIC RECORDS, CRIMINAL BACKGROUND CHECK, CURRENT AND PREVIOUS RENTAL REFERENCES, EMPLOYERS AND PERSONAL REFERENCES.

FALSIFICATION OF INFORMATION WILL RESULT IN DENIAL OF THE APPLICATION OR TERMINATION OF THE RENTAL AGREEMENT.

1 APPLICANT SIGNATURE _____ CELL PHONE () _____
E-MAIL ADDRESS _____

2 SPOUSE SIGNATURE _____ CELL PHONE () _____
E-MAIL ADDRESS _____

FOR OFFICE USE ONLY

Apt Assigned _____	Base Monthly Rent \$ _____	Monthly Pet Fee \$ _____
Application Fee \$ _____	Dep Date _____	Pet Dep \$ _____
Holding Fee \$ _____	Dep Date _____	Pet Fee \$ _____
Community Fee \$ _____	Dep Date _____	Other \$ _____
Conc (if applicable) _____		Dep Date _____

Additional Items Requested (i.e., furniture, washer/dryer, etc.)

Item _____ \$ _____ (Cost)	Item _____ \$ _____ (Cost)
Item _____ \$ _____ (Cost)	Item _____ \$ _____ (Cost)

APPLICATION VERIFICATION CHECKLIST

Every applicant must provide a valid SS# and driver's license or government issued (federal, state, local) photo ID or passport.

Match the photo ID to applicant. Photocopy the photo ID and attach to the application.

If any applicant is not able to provide a SS#, that person is probably a non-US citizen. In this situation, there are four (4) other government issued ID cards (listed below) that can be used to confirm identity. There are no other acceptable forms of ID. (Refer to "Leasing to non-US citizens" in the Policies & Procedures Manual for additional information and instructions). Photocopy the ID used in place of the SS# and attach to the application.

- Form I-551 (Green Card) Form I-688 I-688A Form I-94

Confirmation by: _____ (employee signature)

COMMUNITY STANDARDS & REQUIREMENTS

Initial after completion. (Attach documentation where required)

- | | |
|--|--|
| <input type="checkbox"/> Rental/Pet Reference Received | <input type="checkbox"/> Public Records/Criminal Report Received |
| <input type="checkbox"/> Credit Report Received | <input type="checkbox"/> Employment/Income Verification Received |

Application Approved (Please check, if applicable)

Approval with Adverse Action (attach office copy of adverse action letter)

Approved with additional deposit of \$ _____

Co-signer required Approved by: _____

Date Applicant notified: _____ Notified by: _____

Application Declined (Check, if applicable, and attach office copy of denial letter)

Reason(s) for Denial (Check below all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Unfavorable credit report | <input type="checkbox"/> Unfavorable rental reference |
| <input type="checkbox"/> Insufficient income | <input type="checkbox"/> Exceeds occupancy standards |
| <input type="checkbox"/> Inaccurate information submitted | <input type="checkbox"/> Other (specify) _____ |

How was holding fee returned? _____ Holding Fee returned by: _____
Employee Signature

Holding fee received by: _____ Date _____

Notes: _____

Property Manager's Signature: _____ Date _____