

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.



We Do Business in Accordance With the Federal Fair Housing Law (The Fair Housing Amendments Act of 1988)

It is illegal to discriminate against any person because of race, color, religion, sex, handicap, familial status, or national origin.

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

Applicant 1 Full Name (First, Middle, Last) _____
Social Security Number _____ Date of Birth _____ Relationship _____
Driver's License #/State _____ Student Yes or No _____

Marital Status: _____Single _____Married _____Separated _____Divorced _____Widowed

Applicant 2 – Spouse Only Full Name (First, Middle, Last) _____
Social Security Number _____ Date of Birth _____ Relationship _____
Driver's License #/State _____ Student Yes or No _____

Name 3 Full Name (First, Middle, Last) _____
Social Security Number _____ Date of Birth _____ Relationship _____
Driver's License #/State _____ Student Yes or No _____

Name 4 Full Name (First, Middle, Last) _____
Social Security Number _____ Date of Birth _____ Relationship _____
Driver's License #/State _____ Student Yes or No _____

Name 5 Full Name (First, Middle, Last) _____
Social Security Number _____ Date of Birth _____ Relationship _____
Driver's License #/State _____ Student Yes or No _____

Name 6 Full Name (First, Middle, Last) _____
Social Security Number _____ Date of Birth _____ Relationship _____
Driver's License #/State _____ Student Yes or No _____

Student Status

Under Section 42 of the Internal Revenue Code, certain households with students are ineligible for occupancy at our community. We therefore require all applicants to answer the following questions regarding student status.

Student Status: Are All Persons Listed Above Full Time Students? () Yes () No

If yes, answer the following questions:

Is the household comprised of a single parent and child, neither of whom is dependent on a third party? () Yes () No

Are the applicant's married and file a joint tax return? () Yes () No

Does the household receive AFDC or TANF? () Yes () No

Is the head of household in a federal or state job-training program? () Yes () No

Are all members of this household expected to enroll as full time students in the next twelve months? () Yes () No

Will this student status change within the next 12 months? () Yes () No

If yes, please explain: _____

Name 1 Employment Information Circle All Applicable: Full Time Part Time Self Employed Non-Employed Unemployed

Name 1 (Name of Employer) _____

Street Address, City, State, Zip _____

Name of Supervisor _____ Length of Employment _____

Phone Number _____ Fax Number _____

Current Wages: _____ per: hour week month year **(circle one)**

Do you expect to earn substantial overtime? () Yes () No If yes, how much? _____

Do you have other employment not listed on this application? () Yes () No

Do you work for an employer not listed on this application that pays you by cash? () Yes () No

Name 2 Employment Information Circle All Applicable: Full Time Part Time Self Employed Non-Employed Unemployed

Name 1 (Name of Employer) _____
 Street Address, City, State, Zip _____
 Name of Supervisor _____ Length of Employment _____
 Phone Number _____ Fax Number _____
 Current Wages: _____ per: hour week month year **(circle one)**
 Do you expect to earn substantial overtime? () Yes () No If yes, how much? _____
 Do you have other employment not listed on this application? () Yes () No
 Do you work for an employer not listed on this application that pays you by cash? () Yes () No

Rental History

Current Address: _____
 Street Number and Name Apt # City State Zip Code
 Monthly Rent \$ _____ Date From _____ to _____ Reason for Moving _____
 Landlord's Name _____ Landlord's Phone _____

Previous Address: _____
 Street Number and Name Apt # City State Zip Code
 Monthly Rent \$ _____ Date From _____ to _____ Reason for Moving _____
 Landlord's Name _____ Landlord's Phone _____

INCOME - Do You Receive Any of the Following? If Yes Indicate The Annual Gross Amount.

Employment Income	() Yes () No	Amount \$ _____
Military Pay	() Yes () No	Amount \$ _____
Self Employment Income	() Yes () No	Amount \$ _____
Social Security Benefits	() Yes () No	Amount \$ _____
Disability Income	() Yes () No	Amount \$ _____
Unemployment Income	() Yes () No	Amount \$ _____
Worker's Compensation	() Yes () No	Amount \$ _____
Pension Benefits	() Yes () No	Amount \$ _____
Veteran's Administration Benefits	() Yes () No	Amount \$ _____
Social Service Assistance (AFDC / TANF, ETC.)	() Yes () No	Amount \$ _____
Child Support	() Yes () No	Amount \$ _____
Alimony	() Yes () No	Amount \$ _____
Recurring Monetary Gifts	() Yes () No	Amount \$ _____
Any other income not mentioned on this application (i.e. 2 nd job)	() Yes () No	Amount \$ _____

ASSET INFORMATION - Do You Have Any of the Following? If Yes Indicate The Value.

Checking Account	() Yes () No	Amount \$ _____
Savings Account	() Yes () No	Amount \$ _____
Certificates of Deposit	() Yes () No	Amount \$ _____
Stocks or Bonds	() Yes () No	Amount \$ _____
IRA's or other Retirement Funds	() Yes () No	Amount \$ _____
Mutual Funds	() Yes () No	Amount \$ _____
Trust Accounts	() Yes () No	Amount \$ _____
Life Insurance (Whole or Universal Only, Do not list Term)	() Yes () No	Amount \$ _____
Personal Property Held as an Investment	() Yes () No	Amount \$ _____
Real Estate	() Yes () No	Amount \$ _____
Any other assets not listed above	() Yes () No	Amount \$ _____
Have you disposed of any other assets in the previous 24 months?	() Yes () No	
If yes, what is the current market value of the asset?		\$ _____
The total combined asset value for this household is \$5000 or less	() Yes () No	

Bank Information

Name 1 Name of Bank _____ Amount in Checking \$ _____ Amount in Savings \$ _____

Name 1 Name of Bank _____ Amount in Checking \$ _____ Amount in Savings \$ _____

Vehicle Information

Vehicle 1 Auto Make _____ Year _____ Color _____ State/Tag# _____

Vehicle 2 Auto Make _____ Year _____ Color _____ State/Tag# _____

EMERGENCY CONTACT (Contact person in case of a personal emergency – someone not living with you)

Name 1 Name of Contact _____ Relationship _____
Address (street, city, state) _____ Phone _____

Name 1 Name of Contact _____ Relationship _____
Address (street, city, state) _____ Phone _____

FEES

Applicant has submitted the sum of \$ _____ as a non-refundable payment for a credit check and processing charge of this application. Such sum is not a rental payment or a security deposit. The amount will be retained by management to cover the cost of processing this application as furnished by the applicant. Any false information will constitute grounds for rejection of the application.

Applicant has submitted the sum of \$ _____ as a Holding Fee in connection with this application for residency. **THIS FEE CAN ONLY BE RETURNED TO THE APPLICANT IF THE APPLICATION IS NOT APPROVED.** Upon approval and a signed lease, this fee shall become the security deposit required by the lease agreement. If, for any reason, management decides to decline the application, management will return this holding fee in full.

IMPORTANT TO APPLICANT

- 1 Are you a pet owner? Yes No If yes, type/breed _____ Weight _____ Age _____
No animal is allowed on the premises without prior written consent from management.
- 2 Do you have renter's insurance? Yes No If yes, company & policy # _____
Personal property insurance coverage may be required. Consult with management.
- 3 A minimum of one full month's rent is due at move-in. Prorated rent, if applicable, is due the first day of the following month.
- 4 Move-ins the 25th or later require payment of prorated rent as well as the full month's rent at move-in.
- 5 The lease effective date is final. If the applicant fails to move in on that date, prorated rent will still be charged from the lease effective date.
- 6 It is suggested that local utility companies be contacted at least 72 hours prior to move-in to ensure non-interruption of electrical service and water.
- 7 If this application is approved and applicant fails to occupy the premises on the agreed upon date for any reason, except for delay caused by construction or the holding over of a prior resident, management will assess damages against the holding fee for the amount of rent lost or any expenses incurred due to the applicant's cancellation.

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 company's Equal Credit Opportunity is The Federal Trade Commission, Washington, D.C. 20580

SELECTION CRITERIA

Income: Income and employment and assets will be verified on each applicant. Monthly income must meet the minimum requirements for the community for which the application is submitted. Monthly income cannot exceed the maximum allowable income 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 including convictions, probation, deferred adjudication, court-ordered intervention programs and pending cases for the following types of misdemeanors: sexual misconduct; 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 authorize inquires 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 checks, current and previous rental references, employment and salary verifications, other income verifications, asset verifications, student status verifications and personal references.

In addition, I understand that the above information is being collected to determine my eligibility for residency. I certify that I have revealed all income received and assets currently held or previously disposed of and that I have no assets other than those listed on this form (other than personal property). I further certify that the statements made in this Application are true and complete to the best of my knowledge and belief and am aware that false statements may be cause for termination of my lease and may be punishable under Federal law.

1. APPLICANT SIGNATURE: _____ Date: _____

HOME PHONE: (____) _____ CELL PHONE: (____) _____

E-MAIL ADDRESS: _____

2. APPLICANT SIGNATURE: _____ Date: _____

HOME PHONE: (____) _____ CELL PHONE: (____) _____

E-MAIL ADDRESS: _____

Warning: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to willfully falsify a material fact or make a false statement in any matter within the jurisdiction of a federal agency. Providing false information or any misrepresentation herein will be considered a material breach of the rental agreement and shall result in eviction.

