APPLICATION FOR RESIDENCY CIDER MILL APARTMENTS

DATE_____

- Each adult (18 years or older) must fill out an application
- There is a <u>non-refundable</u> application fee of \$30.00 per applicant

APPLICANT LAST NAME:		_FIRST		MI	
OTHER NAMES USED IN THE PAST (IF APPICABLE)				
DATE OF BIRTH	DRIVER'S LICENSE# _			STATE	
PHONE#	CELL#		_SOCIAL SECURITY #		

RENTAL/ RESIDENCE HISTORY

	CURRENT RESIDENCE	PREVIOUS RESIDENCE (IF LESS THAN 5 YEARS AT CURRENT)
STREET ADDRESS		
CITY/ STATE/ ZIP		
DO YOU OWN/ RENT		
COMPLETE BELOW IF RENT:		
LAST RENT AMOUNT PAID		
MANAGER NAME & PHONE NUMBER		
REASON FOR LEAVING		
IS/ WAS RENT PAID IN FULL?		
WAS NOTICE GIVEN?		
WERE YOU ASKED TO MOVE?		
	FROM/ TO	FROM/ TO
DATES OF RESIDENCY		

EMPLOYEMENT HISTORY

	CURRENT EMPLOYER	PREVIOUS EMPLOYMENT (IF LESS THAN 2 YEARS AT CURRENT)
EMPLOYER		
ADDRESS		
EMPLOYER'S PHONE		
OCCUPATION		
NAME OF SUPERVISOR		
MONTHLY GROSS PAY		
	FROM/ TO	FROM/ TO
DATES OF EMPLOYMENT		

CO-APPLICANT RENTAL/ RESIDENCE HISTORY

	CURRENT RESIDENCE	PREVIOUS RESIDENCE (IF LESS THAN 5 YEARS AT CURRENT)
STREET ADDRESS		
CITY/ STATE/ ZIP		
DO YOU OWN/ RENT		
COMPLETE BELOW IF RENT:		
LAST RENT AMOUNT PAID		
MANAGER NAME & PHONE NUMBER		
REASON FOR LEAVING		
IS/ WAS RENT PAID IN FULL?		
WAS NOTICE GIVEN?		
WERE YOU ASKED TO MOVE?		
	FROM/ TO	FROM/ TO
DATES OF RESIDENCY		

CO-APPLICANT EMPLOYEMENT HISTORY

	CURRENT EMPLOYER	PREVIOUS EMPLOYMENT (IF LESS THAN 2 YEARS AT CURRENT)
EMPLOYER		
ADDRESS		
EMPLOYER'S PHONE		
OCCUPATION		
NAME OF SUPERVISOR		
MONTHLY GROSS PAY		
	FROM/ TO	FROM/ TO
DATES OF EMPLOYMENT		

LIST OTHERS WHO WILL RESIDE IN APARTMENT ON A PERMANENT BASIS:				
FULL NAME	SOC.SEC# (ADULTS)	RELATIONSHIP	DATE OF BIRTH	
				_

OTHER INCOME				
SOURCE		MONTHLY GROSS AMOUNT		
SOURCE		MONTHLY GROSS AMOUNT		
EMERGENCY CONTACT (NOT RESIDING V	-	RELATIONSHIP_		
STREET		PHONE NUMBER		
CITY		STATE	ZIP	
PET INFORMATION TYPE	BREED		WEIGHT	
HOW DID YOU HEAR ABOUT US?				

NOTE: Keeping of pet requires consent of Management, payment of application fees/deposits, and execution of a Pet Addendum, Handicapped assistance animals used for disabilities are not considered pets.

BY SIGNING THIS APPLICATION, YOU DECLARE THAT ALL OF YOUR RESPONSES ARE TRUE AND COMPLETE. ANY FALSE STATEMENT ON THIS APPLICATION CAN LEAD TO REJECTION OF YOUR APPLICATION OR IMMEDIATE TERMINATION OF YOUR LEASE.

SIGNATURE	PRINT	DATE
SIGNATURE	PRINT	DATE
MANAGEMENT REPRESENTATIVE	DATE	

APARTMENT/ APARTMENT STYLE OF INTEREST ______

ANTICIPATED MONTHLY RENT

NOTICE AND AUTHORIZATION

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

This is to inform you that as part of our procedure for processing your application, an Investigative Consumer report may be prepared whereby information obtained through personal interviews with your landlord, employer, or others with whom you are acquainted. This inquiry includes information as to your character general reputation, personal characteristics, mode of living, credit and criminal report. You have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation (Fair Credit Reporting Act).

I hereby agree, in the event of the approval of this application, to execute a lease in accordance with the terms set forth in the Hold Agreement.

I further understand that there is a **non-refundable** fee to cover the cost of processing my application. Owner and/or agent for the owner reserves the right to reject this application and to refuse possession.

I have read and forgoing, certify that the information herein is true and correct, that this application is submitted for the purpose of inducing approval of this application in my/our behalf. Any "yes" or "no" questions unanswered shall be considered a "yes".

<u>Applicant</u>

Have you ever been convicted of or pled guilty or "no contest" to any felony? Yes_____ No_____ Have you ever been convicted of or pled guilty or "no contest" to a sexual offense? Yes_____ No_____ If yes, please explain, providing the location, date and nature of the offense:

AND AUTHORIZE AGENT OF THE LESSOR TO VERIFY THIS INFORMATION, REFERENCES, CREDIT RECORDS, AND PERFORM A CRIMINAL BACKGROUND CHECK.

SIGNATURE	PRINT	DATE
MANAGEMENT REPRESENTATIVE	DATE	

Co-Applicant

Have you ever been convicted of or pled guilty or "no contest" to any felony? Yes_____ No_____ Have you ever been convicted of or pled guilty or "no contest" to a sexual offense? Yes_____ No_____ If yes, please explain, providing the location, date and nature of the offense:

AND AUTHORIZE AGENT OF THE LESSOR TO VERIFY THIS INFORMATION, REFERENCES, CREDIT RECORDS, AND PERFORM A CRIMINAL BACKGROUND CHECK.

SIGNATURE

PRINT

DATE