

INCOME / NET WORTH

(Total Anticipated Income From Date of Move-In Through the Next 12 Months)

*Annual Salary (Including Fees, Tips, Commission, and Bonuses) \$ _____

Annual Salary (Spouse) + \$ _____

**Additional Annual Income (Child Support, Parental Support, Etc.) + \$ _____

Source _____

Total Amount of Assets (Stocks, Bonds, Savings Acct., Equity in R.E., Etc.) \$ _____

Income from Assets + \$ _____

TOTAL ANTICIPATED INCOME = \$ _____

*If self employed you must furnish us with a notarized statement from your CPA or attorney along with a Schedule C showing the amount of income you expect to receive.

ASSETS

Within the past two (2) years, I/we have sold or given away assets (including cash, real estate, etc.) for more than \$1,000 below their fair market value (FMV). Those amounts* are included above and are equal to a total of: \$ _____ (* the difference between FMV and the amount received, for each asset on which this occurred).

I/we have not sold or given away assets (including cash, real estate, etc.) for less than fair market value during the past (2) two years.

I/we do not have any assets at this time.
Complete Asset Certification form

BANK

Checking Account No. _____ Bank Name and Branch _____

Savings Account No. _____ Bank Name and Branch _____

VEHICLE

Year & Make _____ Color _____ License No. & State _____ Registered To _____

Year & Make _____ Color _____ License No. & State _____ Registered To _____

Give description and tag numbers of any boat, motorcycle, camper, van, etc. you may own _____

PETS

Do you own any pets? _____ If so, how many? _____ Kind _____ Weight _____ Color _____

EMERGENCY CONTACT

Emergency Contact:

Name _____ Relationship? _____

Address _____ Phone No. _____

APPLICATION PROCESSING

Applicant has submitted the sum of \$ _____ which is non-refundable for credit check processing charge of the application. Such sum is not a rental payment or security deposit, and will be retained by the owner or its agent to cover the application's processing cost. Applicant hereby represents that all the above statements are true and correct and are made to induce owner and its agents to lease or rent an apartment. Owner and its agents are hereby authorized and given the right to verify by reasonable means the application, including, without limitation, ordering credit and criminal reports, and authorized to exercise in its sole discretion as to whether to reject the application and/or to terminate any lease which may be entered into between the parties, pursuant to this application, whether during the term of said lease or any extensions or renewals thereof, if the applicant has made any false or misleading statements or misrepresentations in this application. It is understood and agreed between the parties that in the event this application for said apartment is rejected by the owner or its agents then the said sum so received herein below shall be returned to applicant without interest. It is further understood and agreed that in the event said application is approved and accepted by the owner or its agents, then said amount received below shall be applied to that security deposit and administrative fee so called for in the lease entered into between the parties. It is further understood and agreed between the parties that in the event that said application is approved and accepted by the owner or its agent and applicant refuses to enter into a lease agreement for the period of time as called for in applicant's application, then the sum so received herein shall be retained by the owner or its agents to serve as liquidated damages it will suffer by reason of applicants failing to enter into residency of the above stated apartment, but the acceptance or rejection of applicant shall remain within the sole discretion of owner and its agents. If owner or its agents cannot deliver possession of the premises to the Applicant at the commencement of the term, all deposits/fees less application fee paid to owner shall be refunded to Applicant.

Applicant has delivered a sum of \$ _____ towards holding deposit which will be applied to the security deposit upon approval for the above stated unit.

Applicant's Signature _____ Date _____ Leasing Agent Signature _____ Date _____

Spouse's Signature _____ Date _____ Property Name _____





Criminal Background Criteria

All leasing applicants must have a criminal background investigation done by the property's administration office. Criminal Background investigations must be done prior to leasing approval.

The results of this investigation, along with other qualifying factors, will determine whether the applicant is qualified to lease the apartment. Following is the criminal background criteria for approval.

An applicant will be declined for leasing if any of the following appear on his/her criminal background report:

1. **Any** convictions of the following felonies and misdemeanors:
 - a. Murder
 - b. Sexual Related Crime
 - c. Rape
 - d. Child Abuse
 - e. Manslaughter
 - f. Arson
 - g. Kidnapping
 - h. Lewd & Lascivious Assault
 - i. Robbery
 - j. Strong Arm Robbery
 - k. Burglary
 - l. Assault/Battery on a Police Officer
 - m. Sexual Battery
 - n. Motor Vehicle Theft
 - o. Larceny or Grand Theft
 - p. Any other criminal offense, which may be considered a threat to the health or safety of the residents and community.

2. **Any convictions in the last 10 years** of the following felonies and misdemeanors:
 - p. Prostitution
 - q. Drug Sale
 - r. Possession of Drug Paraphernalia
 - s. Possession of a Controlled Substance
 - t. Openly Carrying a Weapon
 - u. Vandalism
 - v. Fraud
 - w. Dealing in Stolen Property
 - x. Carrying a Concealed Firearm

This applies to all applicants, co-applicants and all other persons 18 years of age or over who will be residing in the apartments.

Applicant Signature

Management Representative Signature

Date: _____

AUTHORIZATION TO RELEASE INFORMATION

I hereby authorize, **SUMMER PALMS** herein referred to as *Association* and/or its assigns to conduct a comprehensive review of my background through a consumer report and/or an investigative consumer report to be generated for occupancy. Said report may contain information about me from consumer reporting agencies including but not limited to indebtedness, mode of living, present and previous employers and/or employment contracts, driving record/license, validity of social security number, personal references, criminal records, and any information that I have disclosed on my applications and/or any attachments, exhibits.

I authorize the *Association* may contact others who may be able to provide information as to my background, character, and general reputation and authorize without reservation any party or agency contacted by the *Association* to furnish the above mentioned information.

I hereby affirm that my answers to all questions on my application, this authorization form and/or any attachments, exhibits and/or resumes are true and correct and that I have not knowingly withheld any facts or circumstances that would, if disclosed affect my application.

This authorization and consent shall be valid in original, fax or photocopy form.

I authorized the ongoing procurement of the above mentioned information/reports by the *Association* at any time during my occupancy with the *Association*.

The nature and scope of the consumer report and/or investigative consumer report along with the name, address and telephone number of the agency providing the report will be disclosed to you upon timely written request to the personnel department of the *Association*, and within 5 days of the request.

A copy of the consumer report and/or investigative consumer report, a copy of the Summary of Your Rights Under FRAC along with the name, address and telephone number of the agency furnishing the information will be provided before any adverse action is taken by the *Association* based on information contained in the report.

Upon proper identification and payment permissible by law, you have the right to request from the *Association* a copy of any information in its file on you at the time of your request.

By signing below, I acknowledge understanding the purpose of this Authorization Form and its intended use.

Applicant(s) Information

Print Name: _____ Social Security Number: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Driver License Number: _____ Driver's License State: _____

Applicant Signature: _____ Date: _____

Print Name: _____ Social Security Number: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Driver License Number: _____ Driver's License State: _____

Applicant Signature: _____ Date: _____



-APPLICATION VERIFICATION-

FOR OFFICE USE ONLY:

Verified by _____
Date Verified _____

RESIDENCE HISTORY

| Name of Landlord | Payment History | Rent Amount | Length of Occupancy | Any Complaints | Notice Given? | Deposit Refunded | Apartment Condition | Person Giving Information | By |
|------------------|-----------------|-------------|---------------------|----------------|---------------|------------------|---------------------|---------------------------|----|
| | | | | | | | | | |
| | | | | | | | | | |

EMPLOYMENT CHECK

| Employer | Date Started | Date Ended | Salary | Satisfaction | Reason for Leaving | Title | Person Giving Information | By |
|----------|--------------|------------|--------|--------------|--------------------|-------|---------------------------|----|
| | | | | | | | | |
| | | | | | | | | |

SPOUSE'S EMPLOYMENT

| Employer | Date Started | Date Ended | Salary | Satisfaction | Reason for Leaving | Title | Person Giving Information | By |
|----------|--------------|------------|--------|--------------|--------------------|-------|---------------------------|----|
| | | | | | | | | |
| | | | | | | | | |

BANK'S REFERENCES

| Date Opened | Rating | Range | Person Giving Information | By |
|-------------|--------|-------|---------------------------|----|
| | | | | |
| | | | | |

CREDIT REFERENCES

| Firm Name | Rating | Balance | Person Giving Information | By |
|-----------|--------|---------|---------------------------|----|
| | | | | |
| | | | | |
| | | | | |

CREDIT BUREAU INFORMATION

| Date Reported | Date Opened | High Credit | Current Balance | Past Due Amount | Rating | By |
|---------------|-------------|-------------|-----------------|-----------------|--------|----|
| | | | | | | |
| | | | | | | |
| | | | | | | |

MANAGER'S CERTIFICATION

Completed by: _____

Application Approved: Date _____ Manager Signature _____

Application Disapproved: Date _____ Manager Signature _____

Date Applicant Notified of Approval or Denial: _____

If this application was disapproved, was the applicant given the name and address of the person or the reporting agency that verified the application?

Yes _____ No _____ Date _____ Manager's Signature _____

If this application was disapproved, what was the basis for refusal?

- Unfavorable credit report
- Unfavorable report from previous landlord
- Unfavorable employment references
- Incorrect Information submitted on application
- Number of Occupants
- Number or size of pets
- Other (specify) _____

APPLICANT CONVERSATION LOG: _____

