


# RENTAL APPLICATION

Community: \_\_\_\_\_ Apartment #: \_\_\_\_\_ Type: \_\_\_\_\_ Consultant: \_\_\_\_\_ Today's Date: \_\_\_\_\_

|   |  |  |   |   |                   |  |                    |  |  |                  |                    |  |
|---|--|--|---|---|-------------------|--|--------------------|--|--|------------------|--------------------|--|
| How Did You Hear About Us?  |  |  | What is Your Move-In Date?  |   |                   | What type/size Apt. are You Applying For?  |                    |  | E- Mail Address:   |                  |                    |  |
| NAME (First, Middle, Last)  |  |  | Birthdate<br>/ /  |   |                   | Social Sec. #: _____<br>Dr. Lic. #: _____<br>Foreign Citizen ID#: _____  |                    |  | Home Phone #: _____<br>Cell Phone#: _____  |                  |                    |  |
| SPOUSE: (First, Middle, Last)   |  |  | Birthdate<br>/ /  |   |                   | Spouse Soc. Sec. #: _____<br>Dr. Lic. #: _____<br>Foreign Citizen ID#: _____                                       |                    |  | Home Phone #: _____<br>Cell Phone#: _____  |                  |                    |  |
| ADDRESS Present:  |  |  | Street  | Apt.#   | City              | State  | Zip                | <input type="checkbox"/> Own-Mortgage Co.:<br><input type="checkbox"/> Rent-Apt./House from: | Mthly Pymt \$  | Owner's Phone #: | From / - / To /    |  |
| Previous:   |  |  | Street  | Apt.#   | City              | State  | Zip                | <input type="checkbox"/> Own-Mortgage Co.:<br><input type="checkbox"/> Rent-Apt./House from: | Mthly Pymt \$  | Owner's Phone #: | From / - / To /    |  |
| Previous:   |  |  | Street  | Apt.#   | City              | State  | Zip                | <input type="checkbox"/> Own-Mortgage Co.:<br><input type="checkbox"/> Rent-Apt./House from: | Mthly Pymt \$  | Owner's Phone #: | From / - / To /    |  |
| EMPLOYMENT Current:   |  |  | Company   | Position  | City              | State  | Monthly Income: \$ | Supervisor Name:   | Employer Phone #   | Employed Since   | From / - / To /    |  |
| Previous:   |  |  | Company   | Position  | City              | State  | Monthly Income \$  | Supervisor Name:   | Employer Phone #   | Employed Since   | From / - / To /    |  |
| Spouse:   |  |  | Company   | Position  | City              | State  | Monthly Income \$  | Supervisor Name:   | Employer Phone #   | Employed Since   | From / - / To /    |  |
| REFERENCES Bank:  |  |  | Bank Name   | Acct. #:  | Checking          | open <input type="checkbox"/> closed <input type="checkbox"/>  | Branch Location    | City/State   | Bank's Phone #:  |                  |                    |  |
| Bank:   |  |  | Bank Name   | Acct. #:  | Savings           | open <input type="checkbox"/> closed <input type="checkbox"/>  | Branch Location    | City/State   | Bank's Phone #:  |                  |                    |  |
| Credit Ref:   |  |  | Name  | Acct. #:  |                   |  | Location:          | City/State:  | Phone #:   |                  |                    |  |
| OTHER INCOME Type of Other Income:  |  |  | Income Source:  | Monthly <input type="checkbox"/> Annually <input type="checkbox"/>  | \$                | Type of Other Income:  | Income Source:     | Monthly <input type="checkbox"/> Annually <input type="checkbox"/>                           | \$   |                  |                    |  |
| FINANCIAL DATA Credit Card  |  |  | Name  | Card #  |                   |  |                    |  |  |                  | Current Balance \$ |  |
| Credit Card   |  |  | Name  | Card #  |                   |  |                    |  |  |                  | Current Balance \$ |  |
| OTHER OCCUPANTS:  |  |  | Full Name   | Birthdate   | Full Name         | Birthdate  | Full Name          | Birthdate  | Full Name  | Birthdate        |                    |  |
| PET (Possession of a pet requires a pet deposit and pet agreement)  |  |  | <input type="checkbox"/> No Pet, <input type="checkbox"/> Yes Pet - if yes: How many? Type: |   |                   | Breed:   | Weight::           | Color:   | Age:   | Name:            |                    |  |
| EMERGENCY CONTACT:  |  |  | Full Name   | Address   | City              | ST   | Zip                | Phone#:  | Relationship:  |                  |                    |  |
| PARENTS or CLOSEST RELATIVE:  |  |  | Full Name   | Address   | City              | ST   | Zip                | Phone#:  | Relationship:  |                  |                    |  |
| AUTOMOBILE/S 1 <sup>st</sup> Car  |  |  | Year  | Make  | Model             | Color  | Tag #              | State  |  |                  |                    |  |
| 2 <sup>nd</sup> Car   |  |  | Year  | Make  | Model             | Color  | Tag #              | State  |  |                  |                    |  |
| DESCRIPTION Applicant:  |  |  | Height  | Weight (lbs)  | Hair Color        | Eye Color  | Drivers License #: | state:   |  |                  |                    |  |
| Spouse:   |  |  | Height  | Weight (lbs)  | Hair Color        | Eye Color  | Drivers License #: | state:   |  |                  |                    |  |
| MILITARY STATUS (Active Duty Only) Rank:  |  |  | Monthly Pay:  | My enlistment Ends(Mo/Day/Yr):  | Assigned to Unit: | Ends(Mo/Day/Yr):   |                    |  |  |                  |                    |  |
| Unit's Address:   |  |  | Street/PO Box   | City  | State             | Zip  | Unit Telephone #:  |  |  |                  |                    |  |
| Immediate Non-com:  |  |  | Commanding Officer:   | Unless given a permanent change-of-duty, (unknown to me at this time), I will be able to fulfill this agreement. I understand that military orders authorizing base housing do NOT constitute a change-of-duty, nor does assignment to a cruise relieve me of this agreement's term. <input type="checkbox"/> YES |                   |  |                    |  |  |                  |                    |  |
| <p><b>ACKNOWLEDGEMENT OF CORRECT INFORMATION &amp; AUTHORIZATION</b>- Applicant represents statements made on application are true and complete. Applicant/s authorizes the verification of above information, including references, credit information and background if required for the purpose of determining whether or not to lease to me an apartment and to ensure Grand Peaks is in compliance with U.S. Laws. I understand that Grand Peaks and its agents shall have a continuing right to review my credit information, rental application, criminal background, payment history and occupancy history. The applicant/s has paid a non-refundable fee of \$ _____ for the costs and expenses in checking credit and references. Applicant acknowledges false information constitutes reason for denial of application, termination of right of occupancy and forfeiture of deposits and fees paid.</p> <p>In addition, applicant/s has paid \$ _____ earnest money to owner to hold apartment available from date of application to date of lease initiation. In no event shall this period exceed 30 days. If application is not approved, applicant/s withdraws application within 72 hours of the date of application, or apartment for any reason is not available for occupancy, \$ _____ of the earnest money will be refunded. After the initial 72 hour period, should applicant/s cancel application, refuse to sign lease or occupy premises on the agreed date, earnest money is forfeited. Upon occupying premises, the \$ _____ earnest money may be applied to any monies owed at that time, such as apartment deposit, rent due, miscellaneous fees, etc.</p> <p>Grand Peaks does business in accordance with the EQUAL CREDIT OPPORTUNITY ACT, which prohibits discrimination against credit applicants on the basis of gender or marital status. Grand Peaks follows Fair Housing Laws and does not discriminate based on gender, race, color, religion, national origin, familial status or disability.</p> <p>I HAVE READ AND AGREE TO THE PROVISIONS AS STATED:</p> |  |  |   |   |                   |  |                    |  |  |                  |                    |  |
| Applicant's Signature   |  |  | Date  | Spouse's Signature  |                   |  | Date               |         |  |                  |                    |  |
| <b>SUMMARY</b>  |  |  |   |   |                   | <b>VERIFICATION For Office Use Only</b>  |                    |  |  |                  |                    |  |
| Apartment Deposit Due: \$ _____   |  |  | Monthly Rent: \$ _____  |   |                   | REFERENCES:  |                    |  | RENTAL CRITERIA SHEET SIGNED: <input type="checkbox"/> YES <input type="checkbox"/> NO |                  |                    |  |
| Non-refundable Fee Due: \$ _____  |  |  | Pet Rent: \$ _____  |   |                   | RENTAL HISTORY   |                    |  | COMMENTS:  |                  |                    |  |
| Pet Deposit and/or Fee Due: \$ _____  |  |  | Garage/Pkg. Rent: \$ _____  |   |                   | Present Address: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                        |                    |  | _____  |                  |                    |  |
| Administrative Fee Due: \$ _____  |  |  | Other: \$ _____   |   |                   | Previous Address: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                       |                    |  | _____  |                  |                    |  |
| Application Fee Due: \$ _____   |  |  | Length of Lease: _____  |   |                   | Previous Address: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                       |                    |  | _____  |                  |                    |  |
| Other \$ _____  |  |  | Lease Term: From: _____ to _____  |   |                   | EMPLOYMENT HISTORY   |                    |  | COMMUNITY MANAGER'S REVIEW:  |                  |                    |  |
| Pro-rated Rent Due (_____ to _____) \$ _____  |  |  | Date of Application: _____  |   |                   | Current Employer: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                       |                    |  | <input type="checkbox"/> Approval Date: _____  |                  |                    |  |
| 1 <sup>st</sup> Month's Rent: \$ _____  |  |  | Concession: _____   |   |                   | Previous Employer: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                      |                    |  | <input type="checkbox"/> Denial Date: _____  |                  |                    |  |
| TOTAL Monies Due: \$ _____  |  |  |   |   |                   | Spouse's Employer: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>                      |                    |  | Reason/s: _____  |                  |                    |  |
| TOTAL Paid with Application: \$ _____   |  |  |   |   |                   | MONTHLY INCOME   |                    |  | Community Manager's Signature _____  |                  |                    |  |
| TOTAL DUE before Move-In: \$ _____  |  |  |   |   |                   | Applicant: \$ _____  |                    |  | LETTER SENT TO APPLICANT/S:  |                  |                    |  |
|   |  |  |   |   |                   | Spouse: \$ _____   |                    |  | <input type="checkbox"/> Approved, <input type="checkbox"/> Denied,                    |                  |                    |  |
|   |  |  |   |   |                   | Other Income: \$ _____   |                    |  | <input type="checkbox"/> Approved w/Conditions   |                  |                    |  |
|   |  |  |   |   |                   | Total Mthly Income: \$ _____   |                    |  | Date Letter Sent: _____  |                  |                    |  |
|   |  |  |   |   |                   | CREDIT CHECK & BACKGROUND CHECK  |                    |  |  |                  |                    |  |
|   |  |  |   |   |                   | ONESITE RECOMMENDATION:  |                    |  |  |                  |                    |  |
|   |  |  |   |   |                   | <input type="checkbox"/> Approved, <input type="checkbox"/> Denied, <input type="checkbox"/> Approved w/Conditions |                    |  |  |                  |                    |  |
|   |  |  |   |   |                   | Submitted By: _____  |                    |  |  |                  |                    |  |