

Lease Application

Property Name: _____ Date: _____ Apt Size: _____

HOW DID YOU HEAR ABOUT OUR PROPERTY? _____ Referred By: _____

1. FAMILY DATA:

Name of Head of Household (Head)			Spouse Name (if living with the household)		
Current Address: Street	City	State	Zip	Day Phone	Night Phone
Have you ever used another name? (Y/N) _____ If so, please indicate name _____					

PLEASE ANSWER ALL QUESTIONS! Do not leave any space blank, write "No or N/A" where appropriate .No "white-out" used.

Directions to Applicant: Please complete the table below for each member of your household, whether or not those members are related. Include all members who you anticipate will live with you at least 50% of the time during the next 12 months. **(A full time student is anyone who is enrolled for at least five calendar months during this taxable year for the number of hours or courses which are considered full-time attendance by that institution. The five months need not be consecutive).**

If you need additional space for answers to any paragraph listed below, attach additional sheets and make sure you include a reference to the paragraph number, your name and your social security number.

2. HOUSEHOLD COMPOSITION:

Member Number	Name(s)	Relation To Head	Date of Birth	Gender (M/F)	Social Security #	Student (Y/N)	If Yes, PT or FT
1.		HEAD					
2.							
3.							
4.							
5.							
6.							

Do all of the above household members reside in the household 100% of the time? (Y/N) _____ If no, please list the household members that do not live in the household 100% of the time: _____ Anticipated changes in the household size within the next 12 months? (Y/N) _____ If Yes, explain _____ Anticipated change in number of students within the next 12 months? (Y/N) _____ If Yes, explain _____ Current Marital Status: Single ____ Married ____ Divorced ____ Separated ____ Widowed ____

3. HOUSEHOLD INCOME: PRESENT EMPLOYMENT AND OTHER INCOME RECEIVED BY HOUSEHOLD MEMBERS:

For the following indicate the amount of income for all household members (for minors, unearned income amounts only), during the 12 months period beginning this date. If you are uncertain which types of income must be included or may be excluded, please ask the management personnel for assistance.

YES	NO	Do you or anyone in your household have:	Annual Amount
_____	_____	Wages or salaries, including Military or Veteran's Pay (include overtime, tips, bonuses, commissions and payment received in cash)	\$ _____
_____	_____	Child Support, (<u>includes child support you are entitled to</u> but may not be receiving)	\$ _____
_____	_____	Alimony (includes alimony you are entitled to but may not be receiving)	\$ _____
_____	_____	Social Security, SSI or SSID	\$ _____
_____	_____	Public Assistance (General Relief, and/or TANF/AFDC) Do not include Food Stamps	\$ _____

_____	_____	Veterans Administration Benefits	\$ _____
_____	_____	Pension Income	\$ _____
_____	_____	Unemployment Compensation or Worker's Compensation	\$ _____
_____	_____	Net Income from a Business (Self Employment Income) (including rental property, land contracts or other forms of real estate)	\$ _____
_____	_____	Interest, Dividend & Other Income from Net Family Assets	\$ _____
_____	_____	Gift or Contributions from Person not residing at unit (not child support)	\$ _____
_____	_____	Annuities, Life Insurance Payments, Lottery Winnings or Inheritances	\$ _____
_____	_____	Retirement Savings Plans (IRA/401K/Keogh)	\$ _____
_____	_____	Tuition Assistance, Grants, Scholarships (for PHA applicants only)	\$ _____
_____	_____	Other Income _____	\$ _____
TOTAL INCOME			\$ _____

4. ASSET INCOME: List all assets currently held by all household members and the cash value of each. The cash value is the market value of the asset minus reasonable costs there was, or would be, incurred in selling or converting the asset to cash.

<u>YES</u>	<u>NO</u>	<u>Do you or anyone in your household have:</u>	<u>Cash Value</u>
_____	_____	Savings Account Current Balance _____ Interest Rate _____ %	\$ _____
_____	_____	Checking Account? Avg. 6 mo Bal. _____ Interest Rate _____ %	\$ _____
_____	_____	Cash on Hand (includes any cash not listed elsewhere, including purse or wallet)	\$ _____
_____	_____	Certificates of Deposit or Money Market Accounts Current Balance _____ Interest Rate _____ %	\$ _____
_____	_____	Any Stocks, Bonds or Securities?	\$ _____
_____	_____	A Retirement Fund? (Includes IRA's, Keogh accounts)	\$ _____
_____	_____	Annuities, Trust Accounts or Pension Funds?	\$ _____
_____	_____	Have any Personal Property held as an Investment (this includes: paintings, artwork, collectors or show cars, jewelry, coin or stamp collections, antiques etc.)?	\$ _____
_____	_____	Other equity in real estate, rental property, land contracts/contract for deeds or other real estate holding or other capital investments (this includes your personal residence, mobile homes, vacant land, farms, vacation homes, or commercial property)? Market Value Less: (a) any unpaid balance on loans secured by property, and (b) reasonable costs that would be incurred in selling the asset – penalties, broker fees, etc.	\$ _____
_____	_____	Received any Lump Sum Receipts? When _____ (Include inheritances, capital gains, lottery winnings, insurance settlements and other claims)	\$ _____
_____	_____	Other Assets not listed?	\$ _____
_____	_____	Have you disposed of any assets (e.g. real estate, cash, stock, etc.) in the past two years? If yes, please describe: _____	\$ _____

5. EMPLOYMENT HISTORY:

Applicant Employed By:			
How Long:		Supervisor:	
Current Wage: \$	Hours per week:	Overtime wage: \$	Overtime hours per week:
Employer Address:			
Secondary or Other Employment:			
How Long:		Supervisor:	
Current Wage: \$	Hours per week:	Overtime wage: \$	Overtime hours per week:
Employer Address:			
If Unemployed, List Former Employer:			
Date Terminated:		Supervisor:	
Current Wage: \$	Hours per week:	Overtime wage: \$	Overtime hours per week:
Employer Address:			

6. RESIDENCE HISTORY: CURRENT & PREVIOUS LANDLORDS:
(Past 2 years residence including any owned by applicants.)

Current Address		Rent/Month	Utilities/Month	Move-In Date	Reason for Leaving
Landlord Name	Landlord Address			Landlord Phone	
Previous Address		Rent/Month	Utilities/Month	Move-In Date	Reason for Leaving
Landlord Name	Landlord Address			Landlord Phone	
Previous Address		Rent/Month	Utilities/Month	Move-In Date	Reason for Leaving
Landlord Name	Landlord Address			Landlord Phone	

7. VEHICLES (including company cars, motorcycles, etc.):

Member Number	Driver's License Number / State	Model	Year	Color	License Plate Number / State

8. OTHER

Do you have any pets? Please describe below. Pet fees/deposits, weight and/or breed restrictions may apply. The number of pets may be restricted, per the rules of your apartment community. All charges are PER PET.

Pet #1: Dog or Cat _____ Breed _____ Weight at Maturity _____ Color _____

Pet #2: Dog or Cat _____ Breed _____ Weight at Maturity _____ Color _____

Pet #3: Dog or Cat _____ Breed _____ Weight at Maturity _____ Color _____

Do you have full custody of your child(ren)? If less than full custody, please explain the custody arrangements: _____

Have you ever been evicted? No ____ Yes ____ **If Yes, explain** _____

