

# RENTAL APPLICATION

<p>Instructions to applicant: Please completely fill out this Application. Incomplete Applications will not be processed. Return the completed Application &amp; signed authorization forms, to the community office along with your check or money order for the application fee, payable to LAUTREC, LTD. In the amount of \$_____.</p>	<p><b>For Office Use Only</b> Community Name _____ Apt. number _____  Date/time of application _____ Proposed move-in date _____</p>
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Please Print

Applicant	Date of Birth	Co-Applicant	Date of Birth
Social Security Number		Social Security Number	
Drivers License Number		Drivers License Number	
Present Address		Present Address	
City _____ State _____ Zip _____ Telephone _____		City _____ State _____ Zip _____ Telephone _____	
Name of Rental Community or Owner _____ Community Telephone Number _____		Name of Rental Community or Owner _____ Community Telephone Number _____	
How long at Present Address _____ Monthly Pmt. _____		How long at Present Address _____ Monthly Pmt. _____	
Have you ever been evicted from any rental property?		Have you ever been evicted from any rental property?	
Previous Address (if less than 2 years at present address)		Previous Address (if less than 2 years at present address)	
Do you have a pet? _____ Type of Pet: _____		Do you have a pet? _____ Type of Pet: _____	
Notify in case of emergency or death: Name, Address, Phone No. _____		Notify in case of emergency or death: Name, Address, Phone No. _____	

### Employment/Income Information

Applicant's Employer _____ Telephone # _____ Position _____ Supervisors Name _____ Type of Business _____ Length of Employment _____ Monthly Income _____ Number of Dependents _____ Previous Employer (if less than 2 years at present job) _____ Telephone # _____ Position _____ Supervisors Name _____ Type of Business _____ Length of Employment _____	Co-Applicant's Employer _____ Telephone # _____ Position _____ Supervisors Name _____ Type of Business _____ Length of Employment _____ Monthly Income _____ Number of Dependents _____ Previous Employer (if less than 2 years at present job) _____ Telephone # _____ Position _____ Supervisors Name _____ Type of Business _____ Length of Employment _____
Additional monthly income _____ Source _____ Note: You are not required to disclose income from alimony, child support, separate maintenance payments, disability benefits, etc., however, if you are relying on income from any of these sources as a basis of establishing your ability to pay monthly rent and other obligations, please complete this section.	Additional monthly income _____ Source _____ Note: You are not required to disclose income from alimony, child support, separate maintenance payments, disability benefits, etc., however, if you are relying on income from any of these sources as a basis of establishing your ability to pay monthly rent and other obligations, please complete this section.

### Conviction Record

For Applicant: Have you ever been convicted of or plead guilty to a felony? _____ Have you ever been convicted to a misdemeanor involving criminal sexual conduct? _____ If your answer to either of the above questions is yes, please state when, where and the nature of the offense: _____ _____ _____	For Co-Applicant: Have you ever been convicted of or plead guilty to a felony? _____ Have you ever been convicted to a misdemeanor involving criminal sexual conduct? _____ If your answer to either of the above questions is yes, please state when, where and the nature of the offense: _____ _____ _____
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Who other than Applicant & Co-Applicant will reside in the leased premises? Any occupant who is 18 years of age or older must complete the Application for Occupancy on the reverse side of this form. Full Name _____ Full Name _____ Full Name _____ Full Name _____ Full Name _____	<b>FOR OFFICE USE ONLY – RENT STRUCTURE</b>  Base Rent \$ _____ Other \$ _____ Total Monthly Rent \$ _____ Security Deposit \$ _____ Pet Deposit \$ _____  Amount Required for Move-in \$ _____
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I/we affirm the truth of the information contained in this Rental Application in its entirety and understand that if any of the information provided is not true, the application may be denied and/or the tenancy may be immediately terminated. I/we authorize the management to perform a credit and/or a criminal investigation to verify the information provided herein. I/we affirm that I am/we are 18 years of age or older.

Date: \_\_\_\_\_ Signature of Applicant \_\_\_\_\_ Signature of Co-Applicant \_\_\_\_\_

Please be advised that we do business in accordance with fair housing law and make housing available to everyone regardless of race, color, national origin, sex, religion, disability, or familial status.

## APPLICATION FOR OCCUPANCY

(For all additional Occupants who have attained the age of 18 years)

Please be advised that our Apartment/Community Lease provides that:

Any person residing or visiting with Resident for a period of fourteen (14) consecutive days Or for more than thirty (30) days during any twelve month period will be considered to be a Permanent occupant of the Premises and must be approved by Landlord as an additional occupant and registered with Landlord. Landlord may refuse to accept additional occupants for any reason which is not prohibited by law.

In order to make a determination regarding the acceptance of an additional occupant, each additional occupant must provide the following information for review by Management. If an additional occupant, age 18 or older occupies the leased premises without the approval of Management, the tenancy of the additional occupant and/or the tenancy of the Resident may be terminated. Please attach additional sheet if more than two additional occupants over the age of 18.

Please Print

(1) Additional Occupant	Date of Birth	(2) Additional Applicant	Date of Birth
Social Security Number _____			
Drivers License _____			
Present Address _____		Present Address _____	
City _____ State _____ Zip _____		City _____ State _____ Zip _____	
Telephone _____		Telephone _____	
Name of Rental Community or Owner _____		Name of Rental Community or Owner _____	
Community Telephone Number _____		Community Telephone Number _____	
How long at Present Address _____ Monthly Pmt. _____		How long at Present Address _____ Monthly Pmt. _____	
Have you ever been evicted from any rental property? _____		Have you ever been evicted from any rental property? _____	
If you answered 'yes' to the previous question, please explain, when, where, and why: _____ _____ _____		If you answered 'yes' to the previous question, please explain, when, where, and why: _____ _____ _____	
Have you ever been convicted of or plead guilty to a felony? _____		Have you ever been convicted of or plead guilty to a felony? _____	
Have you ever been convicted to a misdemeanor involving criminal sexual conduct? _____		Have you ever been convicted to a misdemeanor involving criminal sexual conduct? _____	
If your answer to either of the above questions is yes, please state when, where and the nature of the offense: _____ _____ _____		If your answer to either of the above questions is yes, please state when, where and the nature of the offense: _____ _____ _____	

I/we hereby affirm to the truth of the information contained in this Rental Application. Further, I recognize that any untrue statements on this application is grounds to deny acceptance as an additional occupant or result in the commencement of eviction proceedings. I authorize the management to perform a criminal background investigation to verify the information provided on this application. I further attest that I am 18 years of age or older.

\_\_\_\_\_  
Date                      Signature of Additional Occupant

\_\_\_\_\_  
Date                      Signature of Additional Occupant