



PHOTO ID VERIFIED SOCIAL SECURITY NUMBER VERIFIED

(MANAGER)

Complete Application Received date _____ time _____ **MUST BE COMPLETED BY EACH ADULT APPLICANT.** INCOMPLETE APPLICATIONS, MISSING OR FALSE INFORMATION WILL RESULT IN A DENIAL. PLEASE READ RENTAL CRITERIA BEFORE YOU APPLY.

Property _____ State _____ Property # _____
 Co-Signer (if applicable) _____
 Apartment/Garage # _____ # of Bedrooms _____ Monthly rent _____ Move-In _____
 If being added as a roommate, current resident's name _____

(APPLICANT)

Lease Term: _____ Applicant Type: Applicant Foreign Applicant Transfer
 Co-Applicant Roommate Co-signer
 Applicant Name _____ Day Phone _____ Evening Phone _____ Email _____
 SS# _____ Birthdate ____/____/____ Drivers License # _____ State _____
Current Address Information
 Name of Apartment _____ Apt. # _____ Dates of Residency _____
 Street Address _____ City _____ State _____ Zip _____
 Current Landlord Name _____ Phone # _____ Have you given notice to vacate?
 Currently Rent Own On Rental Agreement

Cities, Counties & States you have lived in the past 7 years _____
 Do you have a Section 8 voucher? Yes No If "yes," what is the dollar amount? _____
 (If Section 8) Caseworker Name _____ Phone # _____ (send voucher with application)
 Have you ever been evicted? Yes No When? _____
 Have you or any person who will be occupying the unit **ever** been convicted, pled guilty or no-contest to any crime?
 Yes No Who? _____ When? _____ County/State _____
Details
Current Employer _____ Supervisor _____
 Position _____ City _____ State _____ Dates of employment _____
 Payroll phone # _____ ID release # for information (optional) _____
 Monthly Gross Income \$ _____ Other income _____ Specify _____
 How did you hear about us? Apartment Finder Apartment Guide/Apartment Guide.com Apartments.com
 Banners/Signs Current resident referral Drive by Flyers
 For Rent/For Rent.com Guardian website Housing Authority referral Housing Connections
 Newspaper Other referral Rent.com RentNet.com
 Why are you leaving your current residence? _____
 Do you intend to have a pet? _____
 Name(s) and birthdate(s) of those who will be living with you _____
 Auto Make/Year/License # _____
Emergency Contact
 Name _____ Address _____ Phone # _____
Emergency Contact
 Name _____ Address _____ Phone # _____

The undersigned authorize Guardian Management LLC or any screening service to contact my present and previous landlords, my credit references and employers (as listed above) and any credit reporting agency. It is understood and agreed that the sum paid at the time of application will be used as follows: A screening fee will be retained by the landlord as payment for the cost of application screening. Applicant screening entails the checking of your credit, income and other criteria for residency. As part of the application process, Landlord may obtain an Investigative Consumer Report which may include information on your character, general reputation, personal characteristics and mode of living. You have a right to request a written summary of your rights under the Federal Fair Credit Act as well as a complete and accurate disclosure of the nature and scope of the investigation requested. The request should be made to the Landlord or the credit reporting firm listed on the Criteria for Residency. You have the right to dispute the accuracy of any information provided to the landlord by the screening service or credit reporting agency. The name and address of the screening company can be obtained from either the Criteria for Residency form or the manager. Applicant's copy of this application shall be the receipt for the screening fee. **If this application is approved, applicants will have 72 hours from the time of notification to return to execute a Rental Agreement and to pay the amount due.** If applicants fail to execute a rental agreement and to pay the amount due within that time, they will be deemed to have refused the unit and the next application for the unit will be processed. Landlord shall have no liability to applicant until such time as a rental agreement is signed by both parties. I/we understand that giving incomplete or false information is grounds for rejection of this application. If any information supplied on this application is later found to be false, this will be grounds for termination of tenancy. Applicant acknowledges receipt of a copy of the Criteria for Residency. The information contained in this application is true and complete.

GOOD FAITH ESTIMATE
 Approximate number of units currently available, or will in the foreseeable future be available, of the size and in the area requested by Applicant: _____ units
 Approximate number of applications previously accepted and currently under consideration for those units: _____ applications
 If the blanks above are not filled in, then there is at least one unit available and there are no applications ahead of yours currently under consideration.
RECEIPT cash check # _____ m/o
 Screening charges. \$ _____