



## **Application Process**

Thank you for choosing Park Raven Apartments as your new home.

### **To Apply, please complete the following steps:**

- Complete & Sign the Application for Residency
- Provide Two Forms of ID for Verification:
  - One Photo ID
  - Social Security Card
- Proof of Income:
  - Typically presented as 2 most recent, consecutive paystubs; please inquire with leasing professional on additional acceptable forms of Proof of Income
  - **\*\*Please note that some Proof of Income forms may require Management Review & Verification\*\***

### **Investment:**

- Application Fee: \$25.00 Per Applicant
- Reservation (Holding) Fee: \$250.00 per home, due within 24 hours of application approval
  - Approved applications: reservation fee applied to security deposit
  - Cancellation: the reservation fee is only refundable in the event the application is not approved
- Security Deposits: Subject to credit and background screening, security deposits can be \$350.00 or \$500.00.
- **Renter's Insurance**: Our community requires renter's insurance for all residents. Please inquire for coverage details.

### **Lease Agreement:**

- Leases can be signed electronically, or in person. We ask that all lease agreements are signed within **72 hours** of application approval.



# Application for Residency

For Office Use Only:	
Leasing Professional: _____	
Date: _____	Apartment Address: _____
Monthly Rent: _____	Concession/Special: _____
Move-In Date: _____	Lease Term: _____ to _____
Applicant Type: _____	Lease Signer _____ Guarantor _____

## Applicant Information

Full Name:		
Date of birth:	SSN:	Phone:
Current address:		
City:	State:	ZIP Code:
Own    Rent    (Please circle)	Monthly payment or rent:	How long?
Reason for Moving:		Email:
Previous address, if less than 2 years at current:		
City:	State:	ZIP Code:
Owned    Rented    (Please circle)	Monthly payment or rent:	How long?
Driver's License Number:		Issuing State:

## Employment Information

Current employer:		
Employer address:		How long?
Phone:	E-mail:	Fax:
City:	State:	ZIP Code:
Position:	Hourly    Salary    (Please circle)	Annual income:

## Emergency Contact

\_\_\_\_ Please initial to signify that in the event of serious illness or other circumstances, the below person may have access to the leased premises and contents within.

Name (must not reside in apartment home):			
Address:			
City:	State:	ZIP Code:	Phone:
Relationship:			

## List all other Minor Occupants

Name:		
Date of birth:	SSN:	Phone:
Name:		
Date of Birth:	SSN:	Phone:
Name:		
Date of Birth:	SSN:	Phone:

## Pet Information

Pets are accepted only with consent of the Management, and are subject to breed and weight restrictions.

Do you have any pet(s)? ____ Yes ____ No	# Pets:	Vet records may be required to substantiate breed.
Pet #1: Type: ____ Dog ____ Cat	Breed:	Weight:
Pet #1: Type: ____ Dog ____ Cat	Breed:	Weight:

\_\_\_\_ Please initial to signify that you have a service or emotional support animal, and require a request for reasonable accommodation form.

## Vehicle Information

Make:	Model:	License Plate:
Make:	Model:	License Plate:

**Disclosure:**

Have you, or any anticipated occupant of the Premises, been convicted of the illegal possession, manufacturing, or distribution of any controlled substance? \_\_\_\_ Yes \_\_\_\_ No

Have you, or any anticipated occupant of the Premises, been convicted of a sex offense? \_\_\_\_ Yes \_\_\_\_ No

Have you, or any anticipated occupant of the Premises, filed Bankruptcy? \_\_\_\_ Yes \_\_\_\_ No (if yes, proof of discharge may be required)

Have you, or any anticipated occupant of the Premises, been evicted? \_\_\_\_ Yes \_\_\_\_ No

**Terms & Conditions of Application:**

Application Fee: I hereby agree, in the event of the approval of this application, to execute a lease in accordance with the terms set forth in this rental application and my rental liability shall commence pursuant to the terms of the lease. I agree that the application fee, whether my application is approved or not, is not refundable. I hereby understand that, by paying the foregoing fees by check, I am authorizing Landlord to use the information on my check to make a one-time electronic payment from my checking account. The electronic payment will be for the amount indicated on my check and may be withdrawn from my bank account as soon as the same day payment is received. I further understand that my check will not be returned by the financial institution but will instead appear under the "electronic items" section on my bank statement. It is my obligation to notify Landlord in advance if I choose not to have my check converted into an electronic item.

Holding Fee: In addition to the foregoing application fee, I agree that the holding fee accompanying this application shall be retained by Landlord to hold the apartment home herein for occupancy by the undersigned upon approval of this application and execution of a lease agreement. If this application is not approved for any other reason other than the falsification of information by applicant, or failure to provide any documents or other information requested by Landlord, within 3 days of such request, the foregoing holding fee shall be refunded to the undersigned. Otherwise, Landlord shall be entitled to retain the holding fee to cover Landlord's various costs of holding such apartment home for me, and I agree to this amount being retained by Landlord as a reasonable estimate of the actual costs to Landlord to hold the unit for my occupancy. I understand that, if I occupy the unit, the foregoing holding fee will be applied against the security deposit payable pursuant to the lease agreement.

I have read the foregoing, certify that the information herein is TRUE and CORRECT, that this application is submitted for the purpose of inducing approval of this application on my behalf.

By signing this application, I authorize Landlord or agent for Landlord to verify any information contained herein. Any "yes" response to the personal and criminal history questions above, or any false statement on the application, can lead to the rejection of my application and/or immediate termination of my lease agreement. Further, if I subsequently am involved in conduct which would result in a "yes" response to any of the questions set forth above (even after I sign the lease and take possession of the apartment home), I understand that Landlord may terminate the lease agreement.

As an inducement to enter into the lease agreement, I authorize you to secure from a consumer reporting agency an investigative consumer report. This report may contain, but would not be limited to, a consumer credit report, a criminal history records investigation, a rental history and verification of my residences, employment and income. I further authorize you and the consumer reporting agency to verify all information contained in this application and I release all concerned from any liability in connection with the information they give. I have also been advised that I have the right, under the Federal Fair Credit Reporting Act, Section 606(B) to make a written request of you of the investigation. I understand that, in order to perform the investigative consumer report, I will be required to furnish two forms of identification to verify my identity. I will be required to submit a photo ID, and social security card. I also consent to, and authorize the use of, any subsequent consumer report(s) under this authorization in connection with any future assignment or transfer, or with the collection of any debt associated with the rental of a residence for which the application was made. Finally, I acknowledge receipt of the summer of consumer rights required by Section 609 of the Fair Credit Reporting Act entitled "A summary of Your Rights Under the Fair Credit Reporting Act".

I have fully read and understand all the provisions of this application and acknowledge receipt of a completed copy of same.

\_\_\_\_\_  
Applicant Date

\_\_\_\_\_  
Leasing Professional Date

I attest that I have examined the identification documents below presented by the above-named applicant to verify identity and the listed documents appear to be genuine.

For Office Use Only:			
Application Fee: \$_____	Received by: _____	Date: _____	Check/MO Number: _____
Holding Fee: \$_____	Received by: _____	Date: _____	Check/MO Number: _____



**Applicant Identity Verification**  
(For Office Use Only)

Name of Applicant (as it appears on photo ID):

\_\_\_\_\_

Circle documents presented. Initial and date upon verification of each form of identification.

One of each of the documents below must be presented:

ONE photo identification:

1. Driver's License or ID card issued by federal, state or local government agency or entity, provided it contains a photograph or information such as name, date of birth, height, eye color, and address (School ID card with a photograph, US Military card, Military dependent's ID card)
2. US Passport or US Passport Card (expired or current)
3. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)
4. Foreign Passport with Form I-551 stamp or Form I-94

AND the following document:

1. US Social Security Card issued by the Social Security Administration

By signing below, I confirm that I have verified the document(s) presented by the above-named applicant to verify identity, and the listed document(s) appear to be legitimate.

\_\_\_\_\_  
Leasing Professional's Signature

\_\_\_\_\_  
Date