Tenancy Application

FULL SECURITY AND FIRST MONTH'S RENT MUST BE PAID NO LATER THAN 15 DAYS PRIOR TO DATE OF OCCUPANCY.

PAY BY BANK CHECK OR MONEY ORDER TO: (Rental Agent) _____

(NO CASH ACCEPTED)

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1. Property Information

PROPERTY ADDRESS APPLYING FOR: (Rental Agent) _____

DESIRED MOVE-IN DATE: _____

2. Applicant #1 Information

APPLICANT #1: _____

DOB: _____

ADDRESS: _____

TEL. #: _____

EMAIL ADDRESS: _____

SSN #: _____

3. Applicant #2 Information

APPLICANT #2: _____

DOB: _____

ADDRESS: _____

TEL. #: _____

EMAIL ADDRESS: _____

SSN #: _____

4. Household Information

LIST ALL OTHER PERSONS WHO WILL OCCUPY THIS PROPERTY: _____

TOTAL NUMBER OF PERSONS WHO WILL OCCUPY THIS APARTMENT: _____

5. Employment & Income (Applicant #1)

APPLICANT #1: EMPLOYER'S NAME: _____

ADDRESS: _____

TEL. #: _____

EMAIL ADDRESS: _____

MONTHLY INCOME: $_____

SUPERVISOR: _____

HOW LONG EMPLOYED: _____

POSITION: _____

(IF LESS THAN TWO (2) YEARS) BY ABOVE COMPANY, GIVE PREVIOUS POSITION:

6. Employment & Income (Applicant #2)

APPLICANT #2: EMPLOYER'S NAME: _____

ADDRESS: _____

TEL. #: _____

EMAIL ADDRESS: _____

MONTHLY INCOME: $_____

SUPERVISOR: _____

HOW LONG EMPLOYED: _____

POSITITION: _____

(IF LESS THAN TWO (2) YEARS) BY ABOVE COMPANY, GIVE PREVIOUS POSITION:

7. Applicant #1 Financial & Vehicle Information

PLEASE IDENTIFY BANKS WHERE YOU HOLD ACCOUNTS

APPLICANT #1: CHECKING ACCT #: _____

NAME OF BANK: _____

APPLICANT #1 DRIVERS LICENSE #: _____

LICENSE PLATE#: _____

MAKE: _____

NUMBER OF MOTOR VEHICLES IN YOUR HOUSEHOLD: _____

8. Applicant #2 Financial & Vehicle Information

PLEASE IDENTIFY BANKS WHERE YOU HOLD ACCOUNTS

APPLICANT #1: CHECKING ACCT #: _____

NAME OF BANK: _____

APPLICANT #1 DRIVERS LICENSE #: _____

LICENSE PLATE#: _____

MAKE: _____

NUMBER OF MOTOR VEHICLES IN YOUR HOUSEHOLD: _____

9. Emergency Contact Information

APPLICANT #1: NAME: _____

TEL#: _____

EMAIL: _____

RELATION: _____

APPLICANT #2: NAME: _____

TEL#: _____

EMAIL: _____

RELATION: _____

10. Rental History Applicant #1

PRESENT LANDLORD: APPLICANT #1: NAME: _____

PRESENT LANDLORD: APPLICANT #1: ADDRESS: _____

TEL#/EMAIL: _____

PREVIOUS LANDLORD: APPLICANT #1: ADDRESS: _____

TEL#/EMAIL: _____

HOW LONG AT THIS ADDRESS: _____

REASON FOR LEAVING: _____

11. Rental History Applicant #2

PRESENT LANDLORD: APPLICANT #2: NAME: _____

PRESENT LANDLORD: APPLICANT #2: ADDRESS: _____

TEL#/EMAIL: _____

PREVIOUS LANDLORD: APPLICANT #2: ADDRESS: _____

TEL#/EMAIL: _____

HOW LONG AT THIS ADDRESS: _____

REASON FOR LEAVING: _____

12. Disclosures:

PLEASE ANSWER THE FOLLOWING QUESTIONS BY ANSWERING EITHER "YES" OR "NO"

Have you ever been refused a renewal lease, evicted or requested to vacate any premises rented or leased to you?

APPLICANT#1: _____

APPLICANT #2: _____

Are you or any occupant subject to a lifetime registration requirement under a state sex offender registration?

APPLICANT#1: _____

APPLICANT #2: _____

OTHER DEPENDENT: _____

13. Authorization & Agreement

IT IS UNDERSTOOD THAT THE ABOVE STATEMENTS ARE TRUE AND THAT CONSENT IS GIVEN TO THE AGENT OR TO THE LANDLORD TO VERIFY THE ABOVE FACTS, AND APPLICANT AGREES TO HOLD HARMLESS THE LANDLORD FROM ANY AND ALL CLAIMS AS A RESULT OF SUCH INQUIRIES. IT IS ALSO UNDERSTOOD AND AGREED THAT MISREPRESENTATION, FALSIFICATIONS OR OMISSION OF FACTS CALLED FOR IS JUST CAUSE FOR THE LESSOR TO VOID AS NULL ANY LEASE PENDING OR IN EFFECT AND REQUIRES LESSEE TO VACATE SAID PREMISES ON DEMAND. IT IS ALSO UNDERSTOOD THAT THIS

APPLICATION IS MERELY FOR CONSIDERATION AND IS NOT TO BE CONSTRUED AS AN OFFER OR AS PERMISSION TO OCCUPY THE PREMISES.

IT IS UNDERSTOOD AND AGREED THAT ABSOLUTELY NO PETS, NO WATER BEDS AND NO WASHING MACHINES OF ANY TYPE ARE PERMITTED.

APPLICANT #1 Initials: _____ **DATE:** _____

APPLICANT #2 Initials: _____ **DATE:** _____

Rental Agent Section:

I/WE UNDERSTAND THAT A SECURITY DEPOSIT OF $_____ IS REQUIRED, PAYABLE IN ADVANCE AND THAT A MONTHLY RENTAL IS TO BE $_____ PAYABLE IN ADVANCE ON THE 1ST DAY OF EACH MONTH, AND THAT THE PERIOD OF TENANCY WILL BE MONTHS COMMENCING _____.

Apt#: _____

Occup. Date: _____

Application Approved By: _____

Rented By: _____

I/WE UNDERSTAND THAT A SECURITY DEPOSIT OF $_____ IS REQUIRED, PAYABLE IN ADVANCE AND THAT A MONTHLY RENTAL IS TO BE $_____ PAYABLE IN ADVANCE ON THE 1ST DAY OF EACH MONTH, AND THAT THE PERIOD OF TENANCY WILL BE MONTHS COMMENCING _____.

Rental Qualifying Standards

Management does business in accordance with the Fair Housing Act. We provide equal housing and service for all people regardless of race, color, religion, sex, national origin, handicap or familial status, or any other protected class as defined by state and local jurisdiction.

Occupancy Guidelines: New Jersey

Maximum occupants: Three (3) people per one bedroom and four (4) people per two-bedroom, plus one child under the age of eighteen (18) months at the time the lease is signed.

Qualification Guidelines:

Each person over the age of 21 must fill out an application and is considered an applicant. Each applicant must complete an application in its entirety and all information provided must be true, accurate and complete, as well as verifiable. Allowing occupants to live in the apartment that have not been screened and included on the lease will not be tolerated. Income plus verified credit history will be entered into a credit scoring system, which determines both rental eligibility and security deposit level. Criminal history will be verified and must meet the standards outlined below to be eligible to rent. Each applicant's criminal status will be individually evaluated; leaseholders' income and credit will be combined.

Credit & Rental History:

A credit report will be secured for all leaseholders to verify account credit ratings. The results will be entered into the credit scoring model, which determines applicant eligibility to rent and security deposit level. Unfavorable accounts which will negatively influence this score include, but are not limited to collection, charge off, repossession, bankruptcy filed, evictions, judgments and current delinquency.

Income/Employment:

Gross annual income for all leaseholders is combined and entered into the credit scoring model. Income must be verifiable and may include tax documents, pay stubs or offer letters (notarized letters written from an employer). Monthly gross income must be three (3) times the monthly rent. Monthly gross income for a guarantor of the apartment must be five (5) times the monthly rent.

Criminal History:

A criminal background check will be conducted for each applicant and occupant over the age of 18 years of age. The criminal search will be run for all addresses at which the applicant(s) has resided over the previous 24 months. The application may be rejected for criminal related reasons.

Apartment Availability:

The listing of available apartments to rent is updated as each apartment becomes available. This may occur at varying times throughout the day and accordingly, available listing at business day begin may differ from the available listing at business day end. Prices subject to change without notification.

Reasons for not approving an application include, but are not limited to insufficient income, criminal record, household size exceeding occupancy limits, and falsification of the application information.

APPLICANT #1 Initials: _____ **DATE:** _____

APPLICANT #2 Initials: _____ **DATE:** _____

Tenant Screening Authorization Form

Screening Partner: National Tenant Network PO Box 1664, Lake Grove, OR 97035 P: 1-800-228-0989 | F: 1-800-340-1116

Screening Fee: A **non-refundable fee of $45.00 per applicant** is required to process this application. Payment must be made by **Money Order or Official Bank Check ONLY**. Personal checks will not be accepted.

Applicant #1 Information

Full Name (First, Initial, Last): _____

Social Security Number: _____

Date of Birth: _____

Gross Monthly Income: $ _____

Current Address (Street, City, State, ZIP): _____

Previous Address (Street, City, State, ZIP): _____

Applicant #2 Information (If Applicable)

Full Name (First, Initial, Last): _____

Social Security Number: _____

Date of Birth: _____

Gross Monthly Income: $_____

Current Address (Street, City, State, ZIP): _____

Previous Address (Street, City, State, ZIP): _____

Authorization and Certification

I certify that the above information is correct and complete and hereby authorize Management to make any inquiries they feel necessary to evaluate my application for tenancy. If I rent the unit, I understand that the information contained on this form and rental agreement may be maintained in a tenant performance database for up to seven (7) years after I vacate the premises.

Furthermore, I understand this authorization form is valid for no longer than seven (7) years. During this 7-year period, Management can randomly check tenant credit without any further authorization or notice.

Applicant #1 Initials: _____ **Date:** _____

Applicant #2 Initials: _____ **Date:** _____