

Tenant Landlord Connection

Rental Criteria

We do not discriminate against any person based on race, color, religion, gender, national origin, familial status or disability. The rental criteria below explain the policies of our Lease Agreement with regard to standards that must be met by each applicant in order to be approved for residency. Occupancy Standards:

Age: All applicants must be of legal age. All persons 18 years or older are required to complete an application.

Identity Verification: All applicants are required to show a current, valid state issued ID or Government issued ID.

Rental History: We will verify the past 12 months of rental history. Applicants name must have been listed as a "lease holder" on the contract. Living with relatives or friends is not considered rental history. This reference check must reflect a positive history of on time payments, proper move-out notice, and no balances currently owed. If a balance is owed to a rental property or landlord, applicant is required to have a written payment arrangement and have made one payment with the landlord, for approval consideration. This must be reflected on company letterhead and verified. All evictions will be automatically denied. No rental history will not be accepted and therefore denied.

Home Visit: We will conduct a home visit (within 40 miles of Watertown). This visit will be conducted after the credit/background application process has been completed.

Employment History: All applicants must be currently employed. You will be required to provide up to 12 months of consecutive employment. If applicant is self-employed, income verification must be given in the form of tax returns or bank documents within the past 12 months. Gross monthly income must meet or exceed 3 times the monthly rent amount.

Credit History: A credit report will be run on all applicants. The credit report will be graded on the actual credit score. Depending on the severity such as charge offs, unfavorable credit lines and bankruptcies, you may be required to pay an additional deposit for approval or be denied. Deposits for credit are in addition to the normal security deposit charged. There is a \$25.00 fee per adult 18 and older.

If you have been evicted from any rental property this will result in an automatic denial. If you owe a balance to a utility company, this must be paid in full, with documentation prior to approval.

Criminal History: A criminal background check will be performed on all individuals over 18, that will occupy the apartment. Applicants will automatically be denied if they have been or are:

- Convicted or currently charged with any felony.
- Convicted or charged with a misdemeanor that reflects injury to a person or property, or the manufacturing or sale of illegal drugs.
- If you are currently under "deferred adjudication" for any of the above offences, your application will be denied.

Pets: Pets are welcomed per owners discretion, (some properties may vary in breed, type, weight and number) depending on the property. Pet fee is \$250.00 per pet.

Utilities: Resident is responsible for paying for electric, gas, propane and trash service. Electric and Gas will be provided by National Grid in your area. Your service must be set up prior to the time of lease signing, and account # is required as proof of confirmation.

Application Fee & Security Deposit: Application fees are non-refundable. Once Applicant has been approved Security Deposit will be collected. Applicant has 48 hours to cancel application after notified of approval. If approved applicant cancels application after 48 hours, the security deposit will be forfeited.

Renters Insurance: Resident is required to carry \$300,000 worth of Renters liability/property insurance. Owners name of property must be listed as an "additional interest/insured". Please refer to lease or ask associate for specifics. A copy of a current policy is required prior to moving in to the apartment. Keys will not be released to the apartment without this.

By signing below, I agree that I have read, understand, and agree to the terms of the Rental Criteria. I realize falsifying information on my application is grounds for denial.

Signature & Date: _____

Signature & Date: _____

Agent for Owner & Date: _____

Guest Card #	Application \$/Check #	Security Deposit \$/Check #	Building/Apartment #	Approved	Application Date
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Apartment Application and Agreement

\$25 non-refundable application fee required per adult (18 years or older)

I am applying for : ☐ 2 bedroom ☐ 3 bedroom ☐ 4 bedroom ☐ town ☐ garden

Applicant #1

Name: First: _____ MI _____ Last Name: _____

SSN _____

Current Address: _____ City _____ State _____ Zip _____

Telephone # _____ E-mail Address: _____

Cell #: _____ Best time to Contact _____ ☐ AM ☐ PM

Driver's License/ID Number: _____ State _____ Referred by/Source: _____
(copy of driver's license or identification required)

Emergency Contact #1 _____
Name/Relationship _____ Daytime Phone _____ Evening Phone _____

Emergency Contact #2 _____
Name/Relationship _____ Daytime Phone _____ Evening Phone _____

Personal References

Please list three (3) people who you have known at least two (2) years and who are not related to or work with.

Full Name _____ Address _____ Phone # _____ Years known _____

Full Name _____ Address _____ Phone # _____ Years known _____

Full Name _____ Address _____ Phone # _____ Years known _____

Employment Information

☐ Full-Time ☐ Part-Time ☐ Unemployed ☐ Self-Employed

Current Employer: _____ Supervisor: _____

Employer Address: _____ City _____ State _____ Zip _____

Position _____ Date Started _____ Phone # _____

Average hours worked per week: _____ Average Tips \$ _____ Fax # _____

Current Wage: \$ _____ Per: ☐ Hour ☐ Week ☐ Month ☐ Year

Do you have more than one job? ☐ Yes ☐ No Additional Source of Income: _____

Residence History

Do you currently: ☐ Rent ☐ Own Month/Year moved in: _____ Monthly Rent \$ _____

Utilities included: ☐ Yes ☐ No If utilities not included, what is your monthly utility cost? \$ _____

Reason for Leaving: _____

Landlord Name: _____ Phone: _____

Landlord Address: _____ City: _____ Zip: _____

Previous Address: _____ City: _____ Zip: _____

Did you: ☐ Rent ☐ Own Month/Year moved in: _____ Monthly Rent \$ _____

Utilities included: ☐ Yes ☐ No If utilities not included, what is your monthly utility cost? \$ _____

Month/Year moved out: _____ Reason for Leaving: _____

Landlord Name: _____ Phone: _____

Landlord Address: _____ City: _____ Zip: _____

Previous Address: _____ City: _____ Zip: _____

Did you: ☐ Rent ☐ Own Month/Year moved in: _____ Monthly Rent \$ _____

Utilities included: ☐ Yes ☐ No If utilities not included, what is your monthly utility cost? \$ _____

Month/Year moved out: _____ Reason for Leaving: _____

Landlord: _____ Phone: _____

Landlord Address: _____ City: _____ Zip: _____

Additional Information

Personal Information

Bank Name: _____ Address: _____

Phone: _____ Checking Account # _____ Savings Account # _____

Are you or anyone in your household subject to a state sex offender lifetime registration requirement? ☐ yes ☐ no

Have you or anyone in your household been currently engaged in illegal drugs? ☐ yes ☐ no

Have you or anyone in your household been convicted of violating any drug related laws? ☐ yes ☐ no

Have you ever:

Filed for bankruptcy? ☐ yes ☐ no

Been sued? ☐ yes ☐ no

Been evicted? ☐ yes ☐ no

Been convicted of a crime? ☐ yes ☐ no

Do you have bed bugs at your current residence? ☐ yes ☐ no

Have you had bedbugs within the last 6 months? ☐ yes ☐ no

If so, did you comply with all procedural treatments to eradicate them from your personal belongings? ☐ yes ☐ no

Do you have any knowledge that you have bedbugs now? ☐ yes ☐ no

Note: Knowingly bringing bedbugs into the apartment is a violation of your lease, grounds for termination, and you will be responsible for all costs incurred by landlord to remove them from your apartment, and any surrounding apartments if necessary. Explain any "yes" listed above:

Willfully or intentionally refused to pay rent when due? ☐ Yes ☐ No If yes, please explain: _____

Will this unit be your only place of residence? ☐ Yes ☐ No If not, please explain: _____

Applicant #2

Name: First: _____ MI _____ Last Name: _____

SSN _____

Current Address: _____ City _____ State _____ Zip _____

Telephone # _____ E-mail Address: _____

Cell # _____ Best time to Contact _____ ☐ AM/PM ☐

Driver's License/ID Number: _____ State _____
(copy of driver's license or identification required)

Emergency Contact #1 _____
Name/Relationship _____ Daytime Phone _____ Evening Phone _____

Emergency Contact #2 _____
Name/Relationship _____ Daytime Phone _____ Evening Phone _____

Personal References

Please list three (3) people who you have known at least two (2) years and who are not related to or work with.

Full Name	Address	Phone #	Years known
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Employment Information

☐ Full-Time ☐ Part-Time ☐ Unemployed ☐ Self-Employed

Current Employer: _____ Supervisor: _____

Employer Address: _____ City _____ State _____ Zip _____

Position _____ Date Started _____ Phone # _____

Average hours worked per week: _____ Average Tips \$ _____ Fax # _____

Current Wage: \$ _____ Per: ☐ Hour ☐ Week ☐ Month ☐ Year

Do you have more than one job? ☐ Yes ☐ No Additional Source of Income: _____

Residence History

Do you currently: ☐ Rent ☐ Own Month/Year moved in: _____ Monthly Rent \$ _____

Utilities included: ☐ Yes ☐ No If utilities not included, what is your monthly utility cost? \$ _____

Reason for Leaving: _____

Landlord Name: _____ Phone: _____

Landlord Address: _____ City _____ Zip _____

Previous Address: _____ City _____ Zip: _____

Did you: ☐ Rent ☐ Own Month/Year moved in: _____ Monthly Rent \$ _____

Utilities included: ☐ Yes ☐ No If utilities not included, what is your monthly utility cost? \$ _____

Month/Year moved out: _____ Reason for Leaving: _____

Parking Requirements

Only vehicles listed below are permitted to park in residential parking lots or assigned garages.

Vehicle Make/Model _____ Year: _____ License Plate # _____ State _____ Color _____

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Special Requirements

Requesting Disabled/Medical Accessibility: ☐ Yes ☐ No Requirements _____

Are there anything special needs or accommodations we should know about? _____

I also understand that this form is only an application for residency and that the submission of this application does not reserve, nor in any way, guarantee a unit. Upon acceptance of this application, I agree to execute a lease for twelve (12) months before possession of an apartment unit and to pay the security deposit, in accordance with the Apartment Deposit Policy after being notified of acceptance. Failure to pay the security deposit within the stated timeframe will affect the processing of my move in.

I warrant that all statements above are true and may be used by the landlord and managing agent in accepting or rejecting my application. The undersigned acknowledges that if misrepresentation is made and a lease signed, the misrepresentation is a material breach of the lease and the landlord will have the right to terminate the lease.

It is agreed that the applicant(s), if approved shall, immediately following notification to them of such approval, sign the necessary lease of the apartment applied for. If the applicant fails to sign a lease, their application may be regarded as being void and any deposit will be forfeited.

Lease Term: _____ Monthly Rent: _____

Apartment Security Deposit Amount: \$ _____ ☐ Paid Check # _____

Do you have a pet? ☐ Yes ☐ No If yes, what kind? _____ Weight _____

Pet Fees Total \$500-Non-Refundable ☐ Paid Check # _____

(If a pet is acquired and approved by management after initial move-in, the non-refundable fee is due upon approval of pet. Please refer to the Pet Possession and Fee Agreement for details)

It is also understood that there are **NO PETS ALLOWED ON THE PREMISES WITHOUT THE PERMISSION OF LANDLORD.**

Applicant Signature

Date

Applicant Signature

Date

Property Manager/Representative

Date

Background Check Information Form

Please provide copy of driver's license and social security card.
Background check required for each prospective apartment resident.

Last name _____ First Name _____ M.I. _____ Date of Birth _____

Other names used (include maiden name if applicable). _____

Place of Birth _____ Social Security # _____ Drivers License ID # _____ State _____

Gender: ☐ Male ☐ Female Hair Color: _____ Eye Color: _____

Current home address (P.O. Box not accepted) Apt. # _____ City _____ State Zip _____

Previous home address (if moved within last two years) Apt. # _____ City _____ State Zip _____

Phone Number: _____

Additional Information: _____

I hereby certify that all statements on this application are true and correct to the best of my knowledge and belief. I understand that by soliciting this information my prospective landlord will be informed of my previous record and character. I understand that my residency acceptance depends upon successful completion of a criminal background investigation. I understand that any falsification, misrepresentation or omission of facts of this record may be considered cause for lease termination.

Applicant's Signature _____

Print Name _____

Date _____

Background Check Information Form

Please provide copy of driver's license and social security card.
Background check required for each prospective apartment resident.

Last name _____ First Name _____ M.I. _____ Date of Birth _____

Other names used (include maiden name if applicable). _____

Place of Birth _____ Social Security # _____ Drivers License ID # _____ State _____

Gender: ☐ Male ☐

Female Hair Color: _____ Eye Color: _____

Current home address (P.O. Box not accepted) Apt. # _____ City _____ State Zip _____

Previous home address (if moved within last two years) Apt. # _____ City _____ State Zip _____

Phone Number: _____

Additional Information: _____

I hereby certify that all statements on this application are true and correct to the best of my knowledge and belief. I understand that by soliciting this information my prospective landlord will be informed of my previous record and character. I understand that my residency acceptance depends upon successful completion of a criminal background investigation. I understand that any falsification, misrepresentation or omission of facts of this record may be considered cause for lease termination.

Applicant's Signature _____

Print Name _____

Date _____