

Application for Residency

(Every additional live-in resident over the age of 18 as of the lease commencement date must submit a separate application and sign the lease)

	SUMER NOTICE FOR TENANTS ubagent for the landlord, agent for the tenant or tr	ransaction licensee.)
	(Licensee) hereby states that with respect to this	property
(Property Name)	, I am acting in the following	capacity: (check one)
 Owner/Landlord of the Property; A direct employee of the Owner/Lan An agent of the Owner/Landlord pure 	dlord; OR suant to a property management or exclusive lea	sing agreement.
I acknowledge I have received this Notice:	(Consumer Signature)	(Date)
I certify that I have provided this Notice:	(Licensee)	(Date)
Application Date:		
To Horst Realty, Agent for Owner her	reafter referred to as HRe.	
apply to lease apartment:	(Applicant Name)	
	(Address of Apartment/Townhome)	
for the term of(Number of Month)	_commencing on (The 1 st of the month following my move in date	
at the rental Rate of \$	per month.	
Occupancy date(Actual	Move In Date) / (Desired Move	e In Date)

On the date of occupancy of the apartment or the commencement date of the lease, whichever is earlier, I/we shall pay the rent for the first month of the term and all rent for the period from the date of occupancy to date of commencement of the term. I/we agree that in the event HRe is unable to deliver possession of the above apartment on the commencement date, HRe may at its option, offer an apartment of equal model and rental, which I/we shall accept in substitution of the above apartment.

APPLICANT:						
Full Name (Last)	(First)_			(MI) [Date of Birt	:h
Social Security Number						
Home Phone #	Cell Phon	e #	de	Work	Phone # _	ea Code
E-mail Address:				Gender Male/Female	Maı	rital Status
Proof of Identification: Type	(Examples: Driver's Lice	ense, Passpo	rt, etc)	Identification	า #	
Were you referred by a curre	ent resident?	If y	es, Nam	e & Address	S	
If you answered no to the la	st question, how d	id you he	ear about	us?		
LIST OTHERS WHO WILL	RESIDE IN THE A	PARTM	ENT/TO	WNHOME:		
Full Legal Name				Relationship to Applicant Da		Date of Birth
RESIDENCY INFORMATIO	N (Please include	at least	2 years c	of prior reside	ences):	
Present Address:					Phone #	#
City	State	Zip		Monthly	Payment_	
Rent or Own?	Dates: From	Mor	/ nth / Year	To _	Mont	/h / Year
Landlord/Lender Name		_ City _		State	_Phone_	
Previous Address:					Phone #	‡
City	State	Zip		Monthly	Payment_	
Rent or Own?	Dates: From	Mor	/ nth / Year	To _	Mont	/ h / Year
Landlord/Lender Name	(City		State	Phone	



EMPLOYMENT INFORMATION (Please include at least 2 years of employment):

Curre	nt Employer:						
Name_			Ac	ldress			
City		State	Zip				
Phone			_ Fax				
Emplo	yment Date: From	/	To	/	Title		
Gross	Annual Salary \$		-				
Superv	visor Name				Phone		
Previo	ous Employer: (If Cui	rent employ	ment is less th	an 2 years)		
Name_			Ac	ldress			
City		State	Zip		Phone		
Phone			_ Fax				
Employment Date: From			To	/	Title		
Gross	Annual Salary \$		_				
Superv	visor Name				Phone		
OTHER INCOME: Type of Income			Source / Ba		Gross Annual Amount		
	ve /Emergency Cont	act (Not Re	•	ou):			
	Home Phone # Work #						
	Address						
2.	Name						
			Work #				
	Address						



VEHICLES:							
Make		Model	Color	License#	State	Year	
PETS:							
Name	Туре	Gender	Weight	Breed	Color	Age	
Note: Keeping of per Pet Addendum. For						cution of	
Disclosures: The Civil Rights Act of discrimination in hou status. The manage laws which provide a compliance with the Development.	sing based on r ment of this pro in equal housing	ace, color, nat perty is comm g opportunity to	ional origin, roited to comp o all. The fed	eligion, sex, har lying with the le leral agency wh	ndicap, or far tter and spirit ich administe	nilial of the ers	
Application Fee I hearby agree, in the the terms set forth in terms of the lease. I associated with proc regardless of whethe accompanying this a applied against the s	this rental appl agree that the essing the applier or the application pplication are n	ication and my cation. I agree is approved on-refundable	rental liability application ferometric to this amount or denied. I unafter I execute	y shall commen fee is to cover th unt being retained understand the a te this application	ce pursuant the various co and by the Ow application fe	to the sts ner es	
Holding Fee In addition to the appropriation shall be recupancy by me, up rejected for any reast be refunded to me. I unit within TWO days cancel the application Owner as a cancellar my first month's rent	etained by Owr oon approval of on other than the f my application of being notified on after the two of tion fee. I unde	er to hold the this application e falsification is accepted, led of my approday period has	unit identified n and execution of information but I notify Ovoral, the Holdin expired, I ag	on page one of on of a Lease. In provided by mo wher that I do no ing Fee will be r ree that the hold	f this applicat If my applica e, the holding of desire to le eturned to m ding fee be re	ion for tion is g fee shal ease the e. If I etained by	

Any unanswered "yes" or "no" question shall result in the denial of your application. Have you or any member of your household ever been convicted or pled guilty or "no contest" for a

felony ch	,	111011100	i of your modeline ever been derivided of ploa gainty of the derived for a
	Yes		No
Have you sexual of	•	membe	r of your household ever been convicted or pled guilty or "no contest" to a
	Yes		No
Have you	or any	membe	r of your household ever been listed on a registry of sexual offenders?
	Yes		No
Have you drug relat	•		r of your household ever been convicted or pled guilty or "no contest" to a e?
	Yes		No
designate	ed by the	e United	of your household a Specially Designated National or other Blocked Person I States government as a person who commits or supports terrorism or is narcotics trafficking?
	Yes		No
Refused	to pay read	ent where complete	10 years)? Been evicted from tenancy? n due? ed this application in its entirety and certify that the information herein is
Credit In connection	listory tion wit	, Natic h your a	lication, I authorize Owner or agent for Owner to verify my onal Criminal History any other information contained herein. partment Application, a consumer or credit reporting agency may be asked consumer or credit report on you.
reporting living, cre and chec reporting Any false termination	agency dit and k with period agency e statem on of my e question	or bured financial ersons a or bured ent on the lease. ons abo	authorize agent/owner and any National Criminal, consumer or credit au employed by it to investigate my character, general reputation, mode of I responsibility and the statements made with the Application and to inquire and references named herein and also authorize(s) such credit or consumer au to make a consumer or credit report in connection therewith the application will lead to the rejection of my application and/or immediate Further, if I am involved in conduct which would result in a "yes" response to ve, (even after I sign the lease and take possession of the apartment / I the Owner may terminate the Lease.



 Signature _______ Print Name ______ Date______