



The Crossings Apartment Homes

Apartment Homes Rental Application

Personal Information:

Applicant: _____

Current Address: _____

Phone _____ Work _____

Cell _____ Date of Birth _____

Email Address: _____

Social Security #: _____

Drivers Licence #: _____ State Issued _____

Personal Information:

Applicant: _____

Current Address: _____

Phone _____ Work _____

Cell _____ Date of Birth _____

Email Address: _____

Social Security #: _____

Drivers Licence #: _____ State Issued _____

Rental History: (check if you own your home ___)

Current Landlord: _____

Manager/Contact: _____

Phone _____ Fax _____

Move in Date _____ Rent Amount \$ _____

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Current Landlord: _____

Manager/Contact: _____

Phone _____ Fax _____

Move in Date _____ Rent Amount \$ _____

Employment Information:

Current Employer: _____

Address: _____

Supervisor Name _____ Phone _____

Employment Date: _____ Salary: _____

Any Additional Income: _____

Source: _____

Employment Information:

Current Employer: _____

Address: _____

Supervisor Name _____ Phone _____

Employment Date: _____ Salary: _____

Any Additional Income: _____

Source: _____

Vehicle Information:

Make _____ Model _____

Year _____ Color _____

Year _____ Color _____

Lenders Name _____

Vehicle Information:

Make _____ Model _____

Year _____ Color _____

Year _____ Color _____

Lenders Name _____





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Other Persons who will occupy Apartment:

Name: _____ Relationship: _____ DOB: _____

Name: _____ Relationship: _____ DOB: _____

Name: _____ Relationship: _____ DOB: _____

Name: _____ Relationship: _____ DOB: _____

Emergency Contact:

Name _____ Phone Number _____ Relationship _____

Emergency Contact: _____ In the event of serious illness, death, or other circumstances that would make you unavailable, the emergency contact can remove your property from your unit or the common areas.

Pets: Type: _____ Breed: _____ Weight: _____ Name: _____ Rabies #: _____

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SECURITY DEPOSITS: Security Deposit shall be refunded upon denial of this application. I understand I may cancel this application by written notice within 72 hours and receive a full refund of this security deposit within 30 days of the cancellation. If I cancel after 72 hours or refuse to occupy the premises on the agreed upon date, I understand the security deposit will be forfeited to Management.

PET POLICY: Applicant must pay an additional sum of \$300 per pet(up to 40 lbs) or \$500 per pet(over 40 lbs) prior to occupying premises, and upon execution of a pet agreement. This amount is strictly a Pet Fee and is NONREFUNDABLE. NO EXCEPTIONS. LIMIT OF 2 PETS. Certain restrictions may apply.

EQUAL HOUSING OPPORTUNITY: Title viii, section 804 of the Civil Rights Act of 1968 states that it is unlawful to discriminate against any person making application for rental housing, with regard to race, religion, color, sex, national origin, familial status or handicapped status.

QUALIFICATIONS FOR RESIDENCY AT THIS COMMUNITY:

- 1.) Excellent previous rental history or mortgage payments.
- 2.) Monthly Income must be at least 3.5 times the rent amount.
- 3.) Stable credit references.
- 4.) Criminal background report must meet minimal standards. (See statement of rental policy for complete details).

I LEARNED OF THESE APARTMENTS FROM: _____

DO YOU HAVE A MOTORCYCLE: _____ BOAT/TRAILER: _____ WATERBED: _____

PET (BREED) _____ WEIGHT: _____ DESIRED MOVE IN DATE: _____

DESIRED LEASE TERM: _____

APPLICANT SIGNATURE: _____ DATE: _____

CO-APPLICANT SIGNATURE: _____ DATE: _____

SECURITY DEPOSIT AND APPLICATION FEE MUST BE PAID IN SEPARATE CHECKS.

