



APPLICATION FOR RESIDENCY

Apartment #: _____
Move In Date: _____
Rental Rate: \$ _____
LHB Agent: _____
Referred By: _____
Lease Term: **7, 9, 12**, Months

RESIDENT INFORMATION

Applicant Name: _____ Date of Birth: _____ SSN: _____
Phone Number: _____ Email Address: _____
Driver's License # _____ State: _____
Marital Status (Circle One): Single / Married _____ *If married, Spouse will have to complete additional information page
Other Occupants Name: _____ Birth date: _____ Relationship: _____
Other Occupants Name: _____ Birth date: _____ Relationship: _____
Do you have Pets? _____ How Many: _____ Dog/Cat/Other: _____ Breed(s): _____ Weight: _____

RESIDENTIAL HISTORY

Current Address: _____ City: _____ State: _____ Zip: _____
Move In Date: _____ Move Out Date: _____ Monthly Rent \$ _____ Circle One: Rent/Own
Reason for leaving _____
Property/Landlord Name: _____ Is this Owner a Friend/Family Member? Circle One: Yes or No
Property/Landlord Phone: _____ Property/Landlord Email: _____
Previous Address: _____ City: _____ State: _____ Zip: _____
Move In Date: _____^{Street} Move Out Date: _____^{Apt. #} Monthly Rent \$ _____^{City} Circle One: Rent/Own^{State} Zip
Reason for leaving _____
Property/Landlord Name: _____ Is this Owner a Friend/Family Member? Circle One: Yes or No
Property/Landlord Phone: _____ Property/Landlord Email: _____

EMPLOYMENT & INCOME INFORMATION

Current Employer: _____ Circle One: Part Time/Full Time
Position held: _____ Start Date: _____ Supervisor Name: _____
Employer Address: _____ City: _____ St: _____ Zip: _____
Employer Phone: _____ Email: _____ Fax: _____
Gross Monthly Salary: _____ Other Sources of Income: _____
(Examples of other Sources of Income could include: Social Security, Disability, Part-time job, Child Support, Family Assistance, etc.)
Monthly Income from Other Source (if applicable): _____ Total Gross Monthly Income: _____
Previous Employer: _____ Phone: _____

VEHICLE INFORMATION

Vehicle: Year/Make/Model _____ Color _____ Tag # & State _____
Vehicle: Year/Make/Model _____ Color _____ Tag # & State _____

EMERGENCY CONTACT

Emergency Contact Name: _____ Relationship: _____
Phone: _____ Email: _____
Address: _____

*For your Emergency contact, please list a Friend or Relative that will not be living with you.

LIGHTHOUSE BAY APPLICATION POLICIES

Occupants:

- Two occupants allowed per bedroom, regardless of age, sex or relation. (One child up to twelve months of age may be an exception in one or two bedrooms only.)
- All applicants must be at least 18 years of age; those under 18 must be listed as occupants(s).
- Photo ID is required at the time of application.

Credit/Income Application Requirements:

- Our community abides by Fair Housing Policies and does not discriminate against race, color, religion, sex, national origin, disability, and/or familial status. To qualify our residents in accordance with our rental policies, we utilize First Advantage Background Services Inc. for credit and consumer reports. The consumer report includes, but is not limited to, public eviction records and public criminal records.
(Applicants with an eviction and/or certain criminal backgrounds will not be approved for residency)
- All applications must be filled out completely & submitted at the same time as your Application Fee and Security Deposit is paid.
- Applicant(s) must earn a minimum of 3 times the monthly rental amount which must be verified in writing by a 3rd party.
- All Applicants must have an established and valid Social Security number which will be verified through First Advantage Background Services, Inc. & Equifax Inc.
- Applicant(s) must have a minimum of two years rental and/or ownership history. First time renters' may be considered for approval with a higher deposit, if all other qualifications are met. Applicants' who have unpaid collections, poor credit, evictions, negative rental history and/or have prior unfilled lease obligations or owe a balance to any other landlord or property cannot be approved.

Vehicle Information: No Commercial or Recreational Vehicles permitted. Two Vehicle limit per household.

Pets: Only two pets per household. Dogs cannot exceed 30 lbs full-grown. Proper veterinary documentation referencing breed, weight and shot records are required. All pets must be approved, in writing, by Management before the application is considered. Visual approval of dogs is required by Management in addition to proper documentation. A recent photo of your pet will be requested for your file.

Pet Deposits: Cat: \$300 (\$150 Non-refundable fee) Dog: \$500 (\$200 Non-refundable fee)

Application Fees & Security Deposit Payments:

Application Fees and Security Deposit payments must be made payable to "Lighthouse Bay" in Two (2) separate Money orders or Cashier's checks. Personal checks may be accepted for rental payments only AFTER application approval, but under no circumstance can we accept cash or third party payments. You may cancel your application within 24 hours of submission and receive a refund of your deposit.

If my application is accepted, I understand that the Security Deposit (Premises and Pet Deposit, if applicable) will become my refundable Security Deposit upon meeting the terms of the lease and the community rules and regulations. If, for any reason Management decides to decline my application, then Management will refund this good faith deposit and the non-refundable fees, EXCLUDING THE APPLICATION FEE, to me in full.

If this application is approved, and I fail to occupy the premises on the agreed upon date, except for delay caused by construction or the holding over of a prior resident, I understand that Management will assess damages against the deposit for the amount of rental loss and/or any expenses incurred due to my cancellation. As these costs are difficult to ascertain, I agree to forfeit the refundable and non-refundable portion of the Security Deposit as liquidated damages for the apartment I agreed to occupy:

Management cannot determine whether a person will be approved or denied until an application is submitted & processed by all persons that are to occupy the apartment & all application fees are paid. It is necessary that all information is thoroughly verified based on the above policies prior to being considered for approval.

The undersigned warrants and represents the information on this rental application to be true and correct. All persons/or firms named may freely give any requested information concerning me and I hereby waive all right of action for any consequence resulting from such information. The undersigned applicant hereby authorizes manager to release any and all information contained in this application on behalf of the undersigned applicant.

X

Applicant Acceptance Date

X

Spouse Acceptance Date

X

Management Representative Date

LIGHTHOUSE BAY APARTMENT HOMES

Release and Authorization for Verification of Application Information

Name: _____ SSN: _____ DOB: _____

Spouse: _____ SSN: _____ DOB: _____

Present Address: _____

Previous Address: _____

Have you ever had an eviction filed against you?

Applicant: Yes _____ No_____. Spouse: Yes _____ No_____.

Have you ever left owing money to any owner or landlord?

Applicant: Yes _____ No_____. Spouse: Yes _____ No_____.

Have you applied for residency anywhere in the past 2 years, but did not move in?

Applicant: Yes _____ No_____. Spouse: Yes _____ No_____.

Have you ever had adjudication withheld or been convicted of a crime?

Applicant: Yes _____ No_____. Spouse: Yes _____ No_____.

If you have answered "Yes" to any of the above questions, please explain the circumstances regarding the situation, in detail below.

Applicant(s) represents that all of the above statements and information on the application for rental are true and complete, and hereby authorizes an investigative consumer report and verification of any and all information relating to residential history (rental or mortgage), employment history, criminal history records, court records, and credit records. Applicant(s) acknowledges that false or omitted information herein may constitute grounds for rejection of this application, termination of occupancy, and/or forfeiture of fees or deposits and may constitute a criminal offense under the laws of this State. I/We hereby release First Advantage and any of the above from any liability and responsibility arising from any information that may be provided. Facsimiles or emails of this authorization may be used to facilitate multiple inquiries. In the event you receive a facsimile or email of this authorization, it should be treated as an original and the requested information should be released to facilitate my/our application for residency.

X _____
Applicant Signature **Date**

X _____
Spouse Signature **Date**

Approval Date:_____