

# Colonial Square Apartments

## RENTAL APPLICATION INSTRUCTIONS

**Thank you for considering our property for your next home.**

The following documents are required in order to process your application in a timely manner:

1. Completed Application for Rental (4 Pages) \_\_\_\_\_
2. Copy of Drivers License (Applicant and Co-Applicant) \_\_\_\_\_
3. Copy of Social Security Card (Applicant and Co-Applicant) \_\_\_\_\_
4. Copy of your most recent Pay Stub (Applicant and Co-Applicant) \_\_\_\_\_
5. Verification of Additional Income Sources (Applicant and Co-Applicant) \_\_\_\_\_

**APPLICATION FOR RENTAL**

**APPLICANT'S NAME:** \_\_\_\_\_ **SS#:** \_\_\_\_\_

**DL#:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_

**Marital Status:** [ ] Single [ ] Married [ ] Divorced [ ] Separated **Home Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_

**CO-APPLICANT NAME:** \_\_\_\_\_ **SS#:** \_\_\_\_\_

**DL#:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_

**Relationship to Applicant:** \_\_\_\_\_

**ROOMMATES/CHILDREN'S NAME(S):** (1) \_\_\_\_\_ (2) \_\_\_\_\_

**Birth Date** \_\_\_\_\_ **SS#** \_\_\_\_\_ **Birth Date** \_\_\_\_\_ **SS#** \_\_\_\_\_

**PRESENT ADDRESS:** [ ] Apartment [ ] Lease Home [ ] Own Home **Rental Amount:** \$ \_\_\_\_\_

**Street Address** \_\_\_\_\_ **Apt#** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**How Long?** from \_\_\_\_\_ to \_\_\_\_\_. **Landlord Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**If less than 2 years complete the following:**

**PREVIOUS ADDRESS:** [ ] Apartment [ ] Lease Home [ ] Own Home **Rental Amount:** \$ \_\_\_\_\_

**Street Address** \_\_\_\_\_ **Apt#** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**How Long?** from \_\_\_\_\_ to \_\_\_\_\_. **Landlord Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**APPLICANT'S EMPLOYMENT**

**Current Employer:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Business Address:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_

**Position:** \_\_\_\_\_ **Gross Monthly Income:** \$ \_\_\_\_\_ **Dates of Employment:** \_\_\_\_\_

**Previous Employer:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Business Address:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_

**Position:** \_\_\_\_\_ **Gross Monthly Income:** \$ \_\_\_\_\_ **Dates of Employment:** \_\_\_\_\_

**CO-APPLICANT'S EMPLOYMENT**

**Current Employer:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Business Address:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_

**Position:** \_\_\_\_\_ **Gross Monthly Income:** \$ \_\_\_\_\_ **Dates of Employment:** \_\_\_\_\_

**Previous Employer:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Business Address:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_

**Position:** \_\_\_\_\_ **Gross Monthly Income:** \$ \_\_\_\_\_ **Dates of Employment:** \_\_\_\_\_

**PETS**

**Pet #1 (Type and Breed)** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Weight:** \_\_\_\_\_

**Pet #2 (Type and Breed)** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Weight:** \_\_\_\_\_

**OTHER SOURCES OF INCOME**

Will you be applying for rental assistance? \_\_\_\_\_ If yes, with what agency? \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone#: \_\_\_\_\_

Identify any Additional Income ( Child support, Alimony, Parental Support). Amount: \$ \_\_\_\_\_

Other Income Source: \_\_\_\_\_ Amount: \$ \_\_\_\_\_

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**REFERENCES**

Name: \_\_\_\_\_ Home#: \_\_\_\_\_ Work#: \_\_\_\_\_ Relation: \_\_\_\_\_

Name: \_\_\_\_\_ Home#: \_\_\_\_\_ Work#: \_\_\_\_\_ Relation: \_\_\_\_\_

Name: \_\_\_\_\_ Home#: \_\_\_\_\_ Work#: \_\_\_\_\_ Relation: \_\_\_\_\_

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**EMERGENCY CONTACT**

Name: \_\_\_\_\_ Home#: \_\_\_\_\_ Work#: \_\_\_\_\_ Relation: \_\_\_\_\_

Name: \_\_\_\_\_ Home#: \_\_\_\_\_ Work#: \_\_\_\_\_ Relation: \_\_\_\_\_

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**ACKNOWLEDGEMENT**

I represent that the statements set forth in my application are true and complete. I authorize AHDC Colonial Square, LLC, Affordable Housing Development Corp, and/or their agents to make an investigation of my residential history, employment history, income history, credit history, criminal history, and character references. All persons, corporations or firms named may provide any requested information concerning me and I hereby waive all rights of action for any consequences resulting from such information. I acknowledge that any false information herein may constitute grounds for rejection of this application, termination of occupancy, and/or forfeiture of all deposit(s). I acknowledge that if I do not appear or pay all amounts due by my scheduled move-in date, then my deposit(s) will NOT be refunded and the apartment will be rented to the next applicant.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## APPLICANT AUTHORIZATION AND CONSENT

I hereby consent to allow Colonial Square Apartments, through its designated agents and employees, to obtain and verify my credit information, residence history, employment, income, character references, and to obtain a criminal background check, for the purpose of determining whether or not to enter into a lease agreement with me. I understand that should I lease the property, Colonial Square Apartments and its agent shall have a continuing right to review my credit information, rental application, criminal background, payment history and occupancy history for account review purposes and for improving the application process.

APPLICANT NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

CO-APPLICANT NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_