

Rental Application for Tenants and Occupants

Each co-tenant and each occupant 18 years old and over must submit a separate application. Spouses may submit a joint application.



Date when filled out: _____

Welcome to Stebens Manor

<p>ABOUT YOU Full name (exactly as on driver's license or govt. ID card) _____</p> <p>Your street address (as shown on your driver's license or government ID card): _____</p> <p>Driver's license # and state: _____ OR govt. photo ID card #: _____</p> <p>Former last names (maiden and married): _____</p> <p>Your Social Security #: _____</p> <p>Birthdate: _____ Sex: _____</p> <p>Height: _____ Weight: _____</p> <p>Eye color: _____</p> <p>Marital Status: <input type="checkbox"/> single <input type="checkbox"/> married <input type="checkbox"/> divorced <input type="checkbox"/> widowed <input type="checkbox"/> separated</p> <p>Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Do you or any occupant smoke? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Will you or any occupant have an animal? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Kind, weight, breed, age: _____</p>	<p>Your gross annual income is over: \$ _____</p> <p>Date you began this job: _____</p> <p>Supervisor's name and phone: _____</p> <hr/> <p>Previous employer: _____</p> <p>Address: _____</p> <p>City/State/Zip: _____</p> <p>Work phone: (____) _____</p> <p>Position: _____</p> <p>Gross annual income was over: \$ _____</p> <p>Dates you began and ended this job: _____</p> <p>Previous supervisor's name and phone: _____</p>
<p>Current home address (where you now live): _____</p> <p>City/State/Zip: _____</p> <p>Home/cell phone: (____) _____</p> <p>Current rent: \$ _____</p> <p>Email address: _____</p> <p>Name of apartment where you now live: _____</p> <p>Current owner or manager's name: _____</p> <p>Their phone: _____</p> <p>Date moved in: _____</p> <p>Why are you leaving your current residence? _____</p>	<p>YOUR CREDIT HISTORY Your bank's name, city, state: _____</p> <p>List major credit cards: _____</p> <p>Other non-work income you want considered. Please explain: _____</p> <p>Past credit problems you want to explain. (Use separate page.) _____</p>
<p>Your previous home address: _____</p> <p>City/State/Zip: _____</p> <p>Apartment name: _____</p> <p>Name of above owner or manager: _____</p> <p>Their phone: _____</p> <p>Previous monthly rent: \$ _____</p> <p>Date you moved in: _____</p> <p>Date you moved out: _____</p>	<p>YOUR RENTAL/CRIMINAL HISTORY Check only if applicable.</p> <p>Have you, your spouse, or any occupant listed in this Application ever: <input type="checkbox"/> been evicted or asked to move out? <input type="checkbox"/> moved out of a dwelling before the end of the lease term without the owner's consent? <input type="checkbox"/> declared bankruptcy? <input type="checkbox"/> been sued for rent? <input type="checkbox"/> been sued for property damage? <input type="checkbox"/> been charged, detained, or arrested for a felony, misdemeanor involving a controlled substance, violence to another person or destruction of property, or a sex or drug crime that was resolved by conviction, probation, deferred adjudication, court-ordered community supervision, or pretrial diversion? <input type="checkbox"/> been charged, detained, or arrested for a felony, misdemeanor involving a controlled substance, violence to another person or destruction of property, or a sex-related or drug crime that has not been resolved by any method? Please indicate the year, location and type of each felony, misdemeanor involving a controlled substance, violence to another person or destruction of property, or sex or drug crime other than those resolved by dismissal or acquittal. We may need to discuss more facts before making a decision. <i>You represent the answer is "no" to any item not checked above.</i></p> <p>_____</p> <p>_____</p>
<p>YOUR WORK Present employer: _____</p> <p>Address: _____</p> <p>City/State/Zip: _____</p> <p>Work phone: (____) _____</p> <p>Position: _____</p>	<p>YOUR SPOUSE Full name: _____</p> <p>Former last names (maiden and married): _____</p> <p>Spouse's Social Security #: _____</p> <p>Driver's license # and state: _____ OR govt. photo ID card #: _____</p> <p>Birthdate: _____ Sex: _____</p> <p>Height: _____ Weight: _____</p> <p>Eye color: _____</p> <p>Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Present employer: _____</p>

YOUR SPOUSE (continued)
 Address: _____
 City/State/Zip: _____
 Work phone: (____) _____
 Position: _____
 Date began job: _____
 Gross annual income is over: \$ _____
 Supervisor's name and phone: _____

OTHER OCCUPANTS *Names of all persons under 18 and other adults who will occupy the unit without signing the lease. Continue on separate page if more than three.*
 Name: _____ Relationship: _____
 Sex: _____ Birthdate: _____
 DL or govt. ID card # and state: _____
 Social Security #: _____
 Name: _____ Relationship: _____
 Sex: _____ Birthdate: _____
 DL or govt. ID card # and state: _____
 Social Security #: _____
 Name: _____ Relationship: _____
 Sex: _____ Birthdate: _____
 DL or govt. ID card # and state: _____
 Social Security #: _____

YOUR VEHICLES *List all vehicles to be parked by you, your spouse, or any occupants (including cars, trucks, motorcycles, trailers, etc.). Continue on separate page if more than two.*
 Make and color of vehicle: _____
 Year: _____ License #: _____ State: _____
 Make and color of vehicle: _____
 Year: _____ License #: _____ State: _____

WHY YOU APPLIED HERE
 Were you referred? Yes No *If yes, by whom:*

Name of locator or rental agency: _____

 Name of individual locator or agent: _____

 Name of friend or other person: _____

 Did you find us on your own? Yes No *If yes, fill in information below:*
 On the Internet Stopped by Newspaper (name): _____
 Rental publication: _____
 Other: _____

EMERGENCY *Emergency contact person over 18, who will not be living with you:*
 Name: _____
 Address: _____
 City/State/Zip: _____
 Work phone: (____) _____
 Home phone: (____) _____
 Relationship: _____

AUTHORIZATION I or we authorize (name of owner or complex) HP Coolidge Scotchtown Rd LLC

to obtain reports from any consumer or criminal record reporting agencies before, during, and after tenancy on matters relating to a lease by the above owner to me and to verify, by all available means, the information in this application, including criminal background information, income history and other information reported by employer(s) to any state employment security agency. Work history information may be used only for this Rental Application. Authority to obtain work history information expires 365 days from the date of this Application.
 Applicant's signature: _____
 Spouse's signature: _____
You must also sign the Application Agreement on the last page of this Application.

Contemplated Lease Information

To be filled in only if the Lease is not signed by tenant(s) at time of application for rental.

The National Apartment Association Lease to be used must be the latest version published by the association unless an earlier version is initiated by tenant(s) and attached to this Application. The blanks in the Lease will contain the following information:

- Names of all tenants who will sign Lease _____
 _____;
- Name of Owner/Lessor HP Coolidge Scotchtown Rd LLC _____
 _____;
- Property name and type of dwelling (bedrooms and baths) _____
 _____;
- Complete street address 644 Silverlake Scotchtown Rd _____
 City/State/Zip Middletown, NY 10941 _____;
- Names of all other occupants not signing Lease (persons under age 18, relatives, friends, etc.) _____
 _____;
- Total number of tenant and occupants _____;
- Beginning date and ending date of Lease _____
 _____;
- Total security deposit \$ _____;
 Animal deposit \$ 250.00 _____;
- Other fees \$ _____;
- Total monthly rent for dwelling unit \$ _____;
- Rent to be paid at (check one) on-site manager's office or at ACH _____;
- Prorated rent for: first month or second month \$ _____;
- Monthly rental due date _____;
- Late charges due if rent is not paid on or before the 5th _____;
- Initial late charge \$ 75 _____;
 Daily late charge \$ 0.00 _____;
- Returned check charge \$ 50.00 _____;
- Check if the dwelling is to be furnished;

- Utilities paid by owner (*check all that apply*): electricity, gas, water, wastewater, trash, cable TV, master antenna;
- You are (*check one*) required to purchase personal liability insurance or not required to purchase personal liability insurance;
- Agreed reletting charge \$ _____;

- Special provisions regarding parking, storage, etc. (see attached page, if necessary): _____

Application Agreement

- Lease Information.** The Lease contemplated by the parties is attached or, if no Lease is attached, the Lease will be the current NAA Lease noted above. Special information and conditions must be explicitly noted on an attached Lease or in the Contemplated Lease Information above.
- Application Fee (nonrefundable).** You have delivered to our representative an application fee in the amount indicated below, and this payment partially defrays the cost of administrative paperwork. *It's nonrefundable.*
- Application Deposit (may or may not be refundable).** In addition to any application fee, you have delivered to our representative an application deposit in the amount indicated below. *The application deposit is not a security deposit.* However, it will be credited toward the required security deposit when the Lease has been signed by all parties, OR it will be refunded under paragraph 10 if you are not approved; OR it will be retained by us as liquidated damages if you fail to sign or attempt to withdraw under paragraph 6 or 7.
- Approval When Lease Is Signed in Advance.** If you and all co-applicants have already signed the Lease when we approve the Application, our representative will notify you (or one of you if there are co-applicants) of our approval, sign the Lease, and then credit the application deposit of all applicants toward the required security deposit.
- Approval When Lease Isn't Yet Signed.** If you and all co-applicants have not signed the Lease when we approve the Application, our representative will notify you (or one of you if there are co-applicants) of the approval, sign the Lease when you and all co-applicants have signed, and then credit the application deposit of all applicants toward the required security deposit.
- If You Fail to Sign Lease After Approval.** Unless we authorize otherwise in writing, you and all co-applicants must sign the Lease within 3 days after we give you our approval in person or by telephone, or within 5 days after we mail you our approval. *If you or any co-applicant fails to sign as required, we may keep the application deposit as liquidated damages, and terminate all further obligations under this Agreement.*
- If You Withdraw Before Approval.** You and any co-applicant may not withdraw your Application or the application deposit. If you or any co-applicant withdraws an Application or notifies us that you've changed your mind about renting the dwelling unit, we'll be entitled to retain all application deposits as liquidated damages, and the parties will then have no further obligations to each other.
- Completed Application.** An Application will not be considered "completed" and will not be processed until all of the following have been provided to us (*unless checked*): a separate Application has been fully filled out and signed by you and each co-applicant; an application fee has been paid to us; an application deposit has been paid to us. *If no item is checked, all are necessary for the Application to be considered completed.*
- Nonapproval.** We will notify you whether you've been approved within 10 days after the date we receive a completed Application. Your Application will be considered "disapproved" if we fail to notify you of your approval within 10 days after we have received a completed Application. Notification may be in person or by mail or telephone unless you have requested that notification be by mail. You must not assume approval until you receive actual notice of approval. The 10-day time period may be changed only by separate written agreement.
- Refund after Non-approval.** If you or any co-applicant is disapproved or deemed disapproved under paragraph 9, we'll refund all application deposits within 30 days of such disapproval. Refund checks may be made payable to all co-applicants and mailed to one applicant.
- Extension of Deadlines.** If the deadline for signing, approving, or refunding under paragraphs 6, 9, or 10 falls on a Saturday, Sunday, or a state or federal holiday, the deadline will be extended to the end of the next business day.
- Notice to or from Co-applicants.** Any notice we give you or your co-applicant is considered notice to all co-applicants; and any notice from you or your co-applicant is considered notice from all co-applicants.
- Keys or Access Devices.** We'll furnish keys and/or access devices only after: (1) all parties have signed the contemplated Lease and other rental documents; and (2) all applicable rents and security deposits have been paid in full.
- Receipt.** Application fee (nonrefundable): \$ 50.00
 Application deposit (may or may not be refundable): \$ _____
 Other move-in fees (may or may not be refundable): \$ _____
 Total of above application fee and application deposit: \$ _____
 Total amount of money we've received to this date: \$ _____
- Signature.** Our representative's signature is consent only to this Application Agreement. It does not bind us to accept applicant or to sign the proposed Lease.

Acknowledgment. You declare that all your statements on the first page of this Application are true and complete. You authorize us to verify same through any means. If you fail to answer any question or give false information, we may reject the application, retain all application fees and deposits as liquidated damages for our time and expense, and terminate your right of occupancy. Giving false information is a serious criminal offense. In lawsuits relating to the application or Lease, the prevailing party may recover all attorney's fees and litigation costs from the losing party. We may at any time furnish information to consumer reporting agencies and other rental housing owners regarding your performance of your legal obligations, including both favorable and unfavorable information about your compliance with the Lease, the rules, and financial obligations.

(continued on next page)

If you are seriously ill or injured, what doctor may we notify? (We are not responsible for providing medical information to doctors or emergency personnel.)

Doctor's name: _____ Doctor's phone: (____) _____
Important medical information in emergency: _____

Applicant's Signature: _____ Date: _____

Signature of Spouse: _____ Date: _____

Signature of Owner's Representative: _____ Date: _____

FOR OFFICE USE ONLY	
1. Apt. name or dwelling address (street, city):	<u>HP Coolidge Scotchtown Rd LLC</u>
Unit # or type:	_____
2. Person accepting application:	_____ Phone: (____) _____
3. Person processing application:	_____ Phone: (____) _____
4. Date that applicant or co-applicant was notified by	<input type="checkbox"/> telephone, <input type="checkbox"/> letter, or <input type="checkbox"/> in person of <input type="checkbox"/> acceptance or <input type="checkbox"/> nonacceptance: _____ (Deadline for applicant and all co-applicants to sign lease is three days after notification of acceptance in person or by telephone, five days if by mail.)
5. Name of person(s) who were notified (at least one applicant must be notified if multiple applicants):	_____
6. Name of owner's representative who notified above person(s):	_____

Rental Application

