

RESIDENTIAL APPLICATION FOR OCCUPANCY

FOREST PROPERTIES

COMMUNITY _____ EXPECTED OCCUPANCY DATE _____ UNIT NO. _____

PART 1 (PLEASE PRINT PLAINLY)

APPLICANT _____ WORK PHONE _____ DRIVER S LICENSE NO. _____

DATE OF BIRTH _____ SOCIAL SECURITY NO. _____
Month Day Year

SPOUSE S NAME _____ WORK PHONE _____ DRIVER S LICENSE NO. _____

DATE OF BIRTH _____ SOCIAL SECURITY NO. _____
Month Day Year

ARE YOU A CURRENT, ILLEGAL USER OF OR ADDICTED TO A CONTROLLED SUBSTANCE? NO ___ YES ___

IF YES, PLEASE EXPLAIN: _____

HAVE YOU EVER BEEN CONVICTED BY A COURT OF THE ILLEGAL MANUFACTURE OR DISTRIBUTION OF A CONTROLLED SUBSTANCE: NO ___ YES ___ IF YES, PLEASE EXPLAIN: _____

HAVE YOU EVER BEEN CONVICTED FOR ANY OTHER FELONY OFFENSE? NO ___ YES ___

IF YES, PLEASE EXPLAIN: _____

OTHER OCCUPANTS: NAME, AGE, DATE OF BIRTH, AND RELATIONSHIP

1. _____ 3. _____

2. _____ 4. _____

IN CASE OF EMERGENCY NOTIFY _____ TELEPHONE _____
Other Than Occup ants

DO YOU HAVE PETS? IF SO, SPECIFY _____ WEIGHT _____
Type and Breed

PART 2 RESIDENCE HISTORY

A. PRESENT ADDRESS _____ TELEPHONE _____ HOW LONG _____
Street/City/State/Zip

PRESENT LANDLORD _____ TELEPHONE _____ PAYMENT _____

B. PREVIOUS ADDRESS _____ HOW LONG _____

PREVIOUS LANDLORD _____ TELEPHONE _____

PART 3 APPLICANT EMPLOYMENT FOR LAST TWO YEARS (CURRENT & PREVIOUS)

NAME	STREET ADDRESS	CITY	ST	HOW LONG	MONTHLY INCOME	SUPERVISOR	TELEPHONE

SPOUSES EMPLOYMENT FOR LAST TWO YEARS (CURRENT & PREVIOUS)

NAME	STREET ADDRESS	CITY	ST	HOW LONG	MONTHLY INCOME	SUPERVISOR	TELEPHONE

OTHER INCOME _____

PART 4 BANK REFERENCES

CHECKING BANK _____ ACCOUNT NO. _____ TELEPHONE _____

SAVINGS BANK _____ ACCOUNT NO. _____ TELEPHONE _____

TRANSPORTATION

A. TYPE OF AUTO _____ TAG NO. _____ COUNTY _____ STATE _____

B. TYPE OF AUTO _____ TAG NO. _____ COUNTY _____ STATE _____

DO YOU HAVE ANY RECREATIONAL VEHICLES, BOATS, MOTORCYCLES? IF SO, SPECIFY _____ TAG NO. _____

APPLICATION FEE

APPLICANT HAS SUBMITTED THE SUM OF \$ _____ WHICH IS NON REFUNDABLE PAYMENT FOR A CREDIT CHECK AND PROCESSING CHARGE. RECEIPT OF WHICH IS ACKNOWLEDGED BY MANAGEMENT, SUCH SUM IS NOT RENTAL PAYMENT. IN THE EVENT THIS APPLICATION IS DISAPPROVED, THIS SUM WILL BE RETAINED BY MANAGEMENT TO COVER THE COST OF PROCESSING APPLICATION AS FURNISHED BY THE APPLICANT. THIS APPLICATION MUST BE SIGNED BEFORE IT CAN BE PROCESSED BY MANAGEMENT. ANY FALSE INFORMATION WILL CONSTITUTE GROUNDS FOR REJECTION OF APPLICATION.

DEPOSITS

I hereby place \$ _____ with Management as a rental application deposit. This deposit is used to secure the above apartment until processing of the application is complete. If my application is accepted, I understand that management may apply this deposit toward monies that may become due upon taking possession of the apartment. If Management accepts my application, I agree to execute Management's usual rental agreement on or before the occupancy date set out in this application. If for any reason Management decides to decline my application, then Management will refund this deposit to me in full.

I understand I may cancel this application by written notice within _____ hours and receive a full refund of this deposit. If I cancel after _____ hours, or fail to execute Management's usual rental agreement, or refuse to occupy the premises on the agreed upon date, I understand that this deposit will be forfeited by me to said apartments.

APPLICANT S SIGNATURE _____ DATE _____