

Resident Application for Occupancy

1

Community: _____ (hereinafter "Management") Date: _____

Date Desired: _____ Lease Term Desired: _____ Unit #: _____

Part 1 (PLEASE PRINT CLEARLY)

APPLICANT: _____ Main Tel: _____ Work Tel: _____
Full Name (First, Middle, Last)

Cell: _____ Date of Birth (mm/dd/yyyy): _____ SSN: _____

Driver's License #: _____ State: _____ Email: _____

CO-APPLICANT/SPOUSE: _____ Main Tel: _____ Work Tel: _____

Cell: _____ Date of Birth (mm/dd/yyyy): _____ SSN: _____

Driver's License #: _____ State: _____ Email: _____

Total number of persons who will occupy apartment (including applicants): _____

Other occupants:

1) _____ Main Tel: _____
Full Name (First, Middle, Last)

2) _____ Main Tel: _____
Full Name (First, Middle, Last)

In case of emergency notify (other than occupants): _____ Tel: _____

Mailing address of emergency contact: _____

Do you have any pets? If so, please specify type(s)/breed(s): _____ Weight(s): _____ lbs

How did you hear about us? _____

Part 2 RESIDENCE HISTORY FOR LAST THREE YEARS (LIST CURRENT FIRST, THEN PREVIOUS)

Street Address, City, State & Zip: _____

Landlord/Mortgage Co.: _____ Tel: _____ How Long? _____ Mo. Pmt: _____

Street Address, City, State & Zip: _____

Landlord/Mortgage Co.: _____ Tel: _____ How Long? _____ Mo. Pmt: _____

Street Address, City, State & Zip: _____

Landlord/Mortgage Co.: _____ Tel: _____ How Long? _____ Mo. Pmt: _____

Part 3 EMPLOYMENT FOR LAST 3 YEARS (LIST CURRENT FIRST, THEN PREVIOUS)

APPLICANT

Company Name: _____ Address: _____

Job Title: _____ Length of Employment: _____ Monthly Income: _____

Supervisor: _____ Tel: _____

Previous Employment Other Current Employment

Company Name: _____ Address: _____

Job Title: _____ Length of Employment: _____ Monthly Income: _____

Supervisor: _____ Tel: _____

CO-APPLICANT/SPOUSE

Company Name: _____ Address: _____

Job Title: _____ Length of Employment: _____ Monthly Income: _____

Supervisor: _____ Tel: _____

For Office Use Only:

Floorplan: _____ Base Rent/Special: _____ App. Fee: _____ Leasing Consultant: _____

Date Received by Rental: _____ Unit #: _____ Application taken by: _____

Resident Application for Occupancy

2

Previous Employment Other Current Employment

Company Name: _____ Address: _____

Job Title: _____ Length of Employment: _____ Monthly Income: _____

Supervisor: _____ Tel: _____

Other Income? If so, please provide the following information:

Source: _____ Amt./month: _____ (please provide documentation)

Note: Source of additional income will NOT be considered, unless applicant(s) provide documentation that establishes such income.

Part 4 BACKGROUND CHECK

Have you or your co-applicant/spouse ever been convicted, entered a plea of no contest, had prosecution deferred, or adjudication withheld for any crime except for minor traffic violations? YES NO

If yes, please explain _____

Please provide a list of cities and states where you have lived or worked in the last seven (7) years, most recent first:

1) _____ 2) _____ 3) _____ 4) _____ 5) _____

Part 5 VEHICLE IDENTIFICATION

Year/Make/Model: _____ License Plate #: _____ County/State: _____

Year/Make/Model: _____ License Plate #: _____ County/State: _____

APPLICATION FEE

Applicant(s) has submitted the sum of \$50 ("applicatin fee") with this application. Applicant(s) understand and agree that this application shall not be considered by management until the application fee is paid. Applicant(s) understand and agree that the application fee is used by management for the payment of processing this application, which includes costs for verifying the authenticity of the information provided and to obtain or otherwise procure information regarding applicant's credit history, criminal background, and rental references. As such, applicant(s) understand and agree that the application fee is nonrefundable. Applicant(s), by signing this application for occupancy, represent that the information provided herein is true and correct to the best of their knowledge. In the even that management discovers that any information provided herein is false, resident understands and agrees that management may, at management's sole option, reject this application and immediately rescind any current or future agreement with applicant(s).

OTHER FEE(S)

Administrative Fee: A non-refundable administrative fee of \$150.00 will be required once your application has been approved. Applicant(s) understand and agree that the administrative fee is used by management for the cost of reserving the apartment. You have 72 hours to cancel this application from the time payment is made to receive a full refund of the administrative fee.

APPLICANT(S) RELEASE AND AUTHORIZATION

By signing this application for occupancy, the undersigned applicant(s) authorize management to obtain a consumer credit report and any other information necessary in management's sole discretion to assist in the evaluation of this application for occupancy. Applicant(s) understand and agree that any such information obtained by management may include, but is not limited to, applicant's credit history, criminal record, evidence of any civil litigation and civil judgments, records of arrest, past rental history, employment history, salary information and history, vehicle records, driver's license records, driving history, or any other information. Applicant(s) release management, its principals, investors, employees, agents, vendors, the owner(s) of the community or property generally described in this application, and any furnisher or supplier of information related to this application from any and all liability in the procurement, use, distribution, and possession of all obtained information. Applicant(s) also understand and agree that the information provided in this application and other consumer reports, to include credit reports, criminal records, evidence of any civil litigation, and civil judgments, records of arrest, past rental history, employment history, salary information/history, vehicle records, driver's license records, driving history, or any other information may be provided to the state, local, and/or federal government agencies. Any disposal of information received by management shall be done in accordance with 16 CFR part 682 and N.C. Gen. Stat. §75-64, et seq.

****If submitting electronically, please read below and mark appropriately****

Applicant's Signature: _____ Date: _____

Co-Applicant's Signature: _____ Date: _____

I HAVE READ, UNDERSTAND, AND AGREE TO THE ABOVE TERMS AND CONDITIONS. BY CHECKING THIS BOX (IN LIEU OF SIGNING IN PERSON), I AUTHORIZE THE RELEASE OF MY INFORMATION AND GIVE PERMISSION TO AMERICAN RESIDENTIAL INVESTMENT MANAGEMENT TO INITIATE THE APPLICATION PROCESS FOR AN APARTMENT AT THE AFOREMENTIONED APARTMENT COMMUNITY.

For Office Use Only:

Floorplan: _____ Base Rent/Special: _____ App. Fee: _____ Leasing Consultant: _____

Date Received by Rental: _____ Unit #: _____ Application taken by: _____

Resident Application for Occupancy

3

Applicant's Name: _____

Applicant's Address: _____

Social Security #: _____

I hereby authorize the release of current and/or previous employment/rental information for the purpose of determining eligibility for an apartment. This information is kept strictly confidential, and by signing below, I grant permission for the information requested to be released to ARIM to expedite the application process.

(Signature)

(Date)

(For Office Use Only)

LANDLORD: Please fill out Parts I & III of this form and return to ARIM

EMPLOYER: Please fill out Parts II & III of this form and return to ARIM

Part I: Rental Verification

Resident from: _____ to _____ Lease Expiration Date: _____

Proper Notice Given? _____ Monthly Rent: _____ # of Occupants: _____

of Late Payments in last 12 months: _____ # of NSF checks: _____

Most recent NSF: _____ Any Pets? _____ If yes, what kind? _____

Was higher deposit required? _____ Was a co-signer needed? _____ Would you re-rent? _____

Any additional comments? _____

Part II: Employment Verification

Position: _____ Dates of Employment: _____

Annual Salary/Pay: _____ Full/Part Time? _____ # Hrs/Week: _____

Satisfactory? _____ Additional Information: _____

Part III: Authorized Signature

Information provided by (please print): _____

Title: _____ Date: _____

Signature of above: _____

****Information must be transmitted directly to Lakewood Lodge Apartments and is not to be transmitted via applicant or any other party****

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