

**Stonecrest
Village Square
Hanover Place**
Phone 785-842-3040
Fax 785-842-3213
mdiproperties.com
village@sunflower.com

Rental Application

OFFICE USE ONLY

Application fee \$ _____ Cash ☐ Rcpt # _____ Check ☐ # _____

Earnest Money \$ _____ Cash ☐ Rcpt # _____ Check ☐ # _____

Date Application Submitted: _____ Leasing Agent: _____

Application Process

- Complete this application and submit with \$35 nonrefundable application fee. Make check payable to apartment community you are applying for.
- Submit proof of income 3 times greater than the total monthly rent **OR** a completed co-signature addendum.
- You will be notified of your approval status within 5 business days after the receipt of all completed applications/co-signature addendums. Applications will not be processed until ALL applicants for the apartment submit their completed paperwork.

Security Deposit

I hereby deposit \$ _____ as monies toward the total security deposit of \$ _____ and I understand the information stated below. Applicant's initials _____

- If this application is approved, the security deposit will be retained..
- If this application is not approved, the security deposit will be refunded to the applicant.
- Security Deposit will be forfeited if you change your mind and no longer want the apartment **OR** if the lease is not signed within 10 business days after the apartment address has been assigned. Forfeited security deposit will be retained by apartment community as liquidated damages in payment for processing the application and the apartment will be put back on the market.

Apartment

- Address and apartment # you are applying for: _____
- Monthly Rent _____ Date you want to move in if available _____

Personal Information

- Full Name: _____ Date of Birth: _____
- Social Security # :: _____ DL# _____ DL State: _____
- Phone: Cell #: () _____ Work #: () _____ Home #: () _____
- E-mail _____ Name of Bank: _____ City, State: _____
- Roommates: Names of all persons that will be occupying the apartment with you minors will not be required to fill out an application):
Names: _____
- Pets: Do you have any pets? Yes ☐ No ☐ Please check the property's pet rules and regulations to see what restrictions apply.
Breed: _____ Age: _____ Weight: _____ Spayed/Neutered? Yes ☐ No ☐
- Vehicle Information: Year, Make & Model: _____ Color: _____ Tag #: _____ State: _____
- Have you ever been evicted? Yes ☐ No ☐ If yes, please explain: _____
- Have you ever been convicted of a felony? Yes ☐ No ☐ If yes, what was the charge? _____ Date: _____
- Character Reference: Name _____ Phone: () _____
- In case of emergency, please notify: _____ Phone: () _____ relationship _____

Rental History

- **Current Address:** _____ City: _____ State: _____ Zip: _____
Month / Year Moved In: _____ Reason for Leaving: _____
Apartment Complex or Owner's Name or Mortgage Co: _____ Phone #: _____
- **Previous Address:** _____ City: _____ State: _____ Zip: _____
Dates you lived there: _____ Reason for Leaving: _____
Apt Complex / Owner's Name: _____ Phone #: () _____
- **Previous Address:** _____ City: _____ State: _____ Zip: _____
Dates you lived there: _____ Reason for Leaving: _____
Apt Complex / Owner's Name: _____ Phone #: () _____

Employment History

- **Your Status:** Student ☐ Employed ☐ Military ☐ Retired ☐ Unemployed ☐
*Must submit proof of income 3 times greater than the total monthly rent to forgo the Co-Signature Addendum.
If income or credit report requirements are not met, please have a co-signer complete the addendum and turn it in with this application.*
- **Current Employer:** _____ Date Employed: _____
Position / Rank: _____ Gross Monthly Income: _____
Supervisor's Name: _____ Phone #: () _____
- **Previous Employer:** _____ Date Employed: _____
Position / Rank: _____ Gross Monthly Income: _____
Supervisor's Name: _____ Phone #: () _____
- **Other Monthly Income:** \$ _____ Source of other income: _____

Applicant Signature

The undersigned specifically acknowledges and agrees that:

1. The leased property will not be used for illegal or prohibited purpose or use.
2. All statements in this application are made for the purpose of obtaining a lease of a dwelling or other property.
3. Verification or re-verification of any information contained in the application may be made at any time by Landlord, its agents, successors, and assigns, either directly or through a credit/criminal reporting agency, from any source named in this application, and the original not approved.
4. Landlord, its agents, successors, and assigns will rely on the information in the application and I have a continuing obligation to amend and/or supplement the information provided in this application if any of the material facts which I have represented herein should change prior to execution of the lease.
5. In the event my lease payments or other financial obligations under the lease become delinquent, Landlord, its agents, successors, and assigns, in addition to all other rights and remedies, may report my name and account information to a credit reporting agency. This inquiry includes information as to your character, general reputation, employment, credit, ability to pay rent, past rental history, and mode of living.

This applicant may be disapproved as a result of the following credit report decision criteria:

1. Any bankruptcy, judgment, suit, foreclosure, tax lien, garnishment, or repossession within the last 24 months.
2. No tradelines with a date opened 6 months or older.
3. More than one charge off or collection within the last 24 months (excluding medical).
4. More than one trade line rated a 4 or higher (90+ days past due).
5. Debt to income is greater than 50%. If not met, decision factor will read "DEBT RATIO".
6. Have had a felony conviction or subjected to deferred adjudication for a felony; have had a misdemeanor conviction for a sex crime; have had a conviction or deferred adjudication for a crime that is drug related or that involves violence against a person or property.

This application may also be disapproved as a result of any misrepresentation, insufficient information as a result of incomplete application, or a felony conviction. You have the right to make a written request within a reasonable period of time to receive additional information about the nature and scope of this investigation. **An application must be completed and signed by all adults who will occupy the apartment.**

Signature of Applicant: _____ **Date:** _____

OFFICE USE ONLY

Verifications: Rental History ☐ Employment ☐ Character Reference ☐
Application is: Approved ☐ Approved with Co-Signature Addendum ☐ Not Approved ☐ Reason: _____
Date & time of initial notification: _____ at _____ a.m./p.m. Talked to Applicant ☐ Left Message ☐ Other: _____

**Stonecrest
Village Square
Hanover Place**
Phone 785-842-3040
Fax 785-842-3213
mdiproperties.com
village@sunflower.com

Rental Verification

This Section to be Completed by Landlord – **Applicant to sign only**

I, _____ have applied for an apartment at Jayhawk Village Inn.
(Print Name)

I give my authorization to release any information regarding my residency for the following address:

Street Address _____

City, State, ZIP _____

Dates Rented (month/year): From _____ To _____ Rental \$ _____

Name of Company/Landlord _____ Phone _____

Fax _____

Applicant Signature X _____ **Date** _____

This Section to be Completed by Previous Landlord

- | | | |
|--|------------------------------|---|
| ➤ Was proper notice given? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| ➤ Are there any outstanding debts? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| ➤ Were there any late charges? | <input type="checkbox"/> No | <input type="checkbox"/> Yes, How Many? _____ |
| ➤ Were there any NSF payments? | <input type="checkbox"/> No | <input type="checkbox"/> Yes, How Many? _____ |
| ➤ Would you re-rent? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| ➤ Were all lease conditions met & rules complied with? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If NO, what were the violations? _____

➤ Monthly Rental \$ _____ Lease termination Date _____

➤ Did they have any pets? _____ If yes, what kind _____

Comments: _____

Representative Signature

Title

Date

**Stonecrest
Village Square
Hanover Place**
Office: 850 Avalon Rd #4
Phone 785-842-3040
Fax 785-842-3213
village@sunflower.com

Employment Verification

I give my authorization to release any information regarding my employment:

Applicants Signature X _____ Date _____

Request for Employment Verification

Date: _____

To: _____

Re: _____

Please fill out the following information and fax it to **785-842-3213**. Thank you!

Date of Employment: _____

Present Position: _____

(Circle one) Temporary Permanent

Current Gross Base Pay: _____

(Circle one) annual monthly weekly hourly other _____

Hours per week: _____

Comments:

Your name: _____

Position: _____