



This application does not cover all needed information needed for residency. All additional information will be requested at time of processing. A \$25 application fee will need to be paid in full when processing for an available unit begins.

**Head of Household for Waitlist/Applicant**

☐ Mr. ☐ Mrs. \_\_\_\_\_  
☐ Ms. First Name MI Last Name Date of Birth

**\*\*Co-Applicants: (Additional adults in the household will need to fill out complete application once an apartment has become available and processing starts)**

Number of additional adults in the household \_\_\_\_\_

Number of minor children in the household \_\_\_\_\_

Number of bedrooms needed (select all that apply): \_\_SRO \_\_Eff \_\_1 bedroom \_\_2 bedroom

Community requested: \_\_\_\_\_

Telephone Number \_\_\_\_\_ Additional Telephone number \_\_\_\_\_

Email address: \_\_\_\_\_

Basic income: \_\_employed \_\_social security/va benefits/pension \_\_unemployment \_\_Other \_\_\_\_\_

Monthly income amount: \_\_\_\_\_ ( hourly / weekly / monthly / annually )

Student Status Full time Y/N: \_\_\_\_\_ Veteran Status Y/N \_\_\_\_\_

Special Need: \_\_ Homeless \_\_Disability \_\_single parent household \_\_elderly (55+)

If a handicap accessible unit became available would it benefit you: Y or N \_\_\_\_\_

Do you have any assistance animals? If so, indicate kind, weight, breed, age \_\_\_\_\_

Emergency Contact: \_\_\_\_\_  
Name Ph. Number Relationship

**APPLICANT SIGNATURE CLAUSE:**

I certify that answers given herein are true and complete to the best of my knowledge. I authorize verification or investigation of all statements contained in this application via consumer credit reports, rental history reports, criminal history reports and other means. Such authorization does not require the owner or its agents to make verifications or investigations. Failure to answer any of the above inquiries shall entitle owner to reject this application. False information given above shall entitle owner to (1) reject this application (2) terminate resident's right for occupancy. Owner reserves the right to regularly and routinely furnish information to consumer reporting agencies about performance of lease obligations by residents. Such information may be reported at any time and may include both favorable and unfavorable information regarding a resident's compliance with the lease, rules, and financial obligations. Owner and/or Property Manager have no duty to provide emergency care or give notice of emergency to any person and shall not be liable to applicant, resident, any occupant, or any guest for failure to do so.

We are an equal housing opportunity provider. We do not discriminate on the basis of race, color, sex, national origin, religion, handicap, or familial status (having children under age 18).

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_



Office Use:

Assigned _____	date _____	Turned down unit _____
Assigned _____	date _____	Turned down unit _____
Assigned _____	date _____	Turned down unit _____
Removed from waitlist _____		