RESIDENTIAL LEASE RENTAL CRITERIA

HP Ventures Group LLC-Development Services supports The Fair Housing Act-as amended, prohibiting discrimination in housing based on race, color, religion, national origin, sex, handicap, or familial status. The following qualification standards will be required from every prospective resident.

A Rental Lease Application shall be completed by every applicant and occupant eighteen years of age and over who will be occupying the apartment without falsifications. Valid, Current State or U.S. Government issued picture identification is required. This includes a state issued Driver's License or State identification card. Management reserves the right to discontinue the verification process of an application once negative and/or derogatory information is found.

In order to help us complete your application in a timely manner, we ask that you complete every section of the application. There should be no lines left blank. If a line does not apply, please fill it in with "N/A". If you need to call us back with more information, please-do so as quickly as possible. Be sure to sign the application and date it where indicated. The lease does not become effective until the Residential Lease Application is approved by Management and the Residential Lease Agreement has been fully executed by both Landlord and all Tenants.

APPLICATION FEE/ADMINISTRATIVE FEE: A \$40.00 fee per applicant is due when the application is submitted, this is non-refundable and paid to Chicago Apartments and Condos. When you sign your lease you will need to pay the \$400 non-refundable move-in fee, the first month's rent and any pet fees that are required. HP Ventures Group LLC-Development Services does not take security deposits.

OCCUPANCY STANDARD: TWO PERSON MAXIMUM OCCUPANCY PER BEDROOM.

AGE REQUIREMENT: All occupants 18 years or older will be required to complete an application (even if living with parent or guardian).

INCOME REOUIREMENT: The gross monthly income of all lease holder(s) will be considered jointly, and must equal 3 times the rental amount on the apartment. All income must be verifiable.

EMPLOYMENT VERIFICATION: Lease Holder(s) must have stable and verifiable employment or, if unemployed or retired, will be considered self-employed and must meet the guidelines for self employment.

SELF EMPLOYMENT: Applicant must provide the previous year's personal income tax return and the previous two months personal hank statements as evidence of sufficient income. Persons who hold jobs that are commission only, base salary plus commission, tips...or...bonuses will be considered self-employed.

RENTAL HISTORY: One (I) year resident history will be reviewed and must exhibit no derogatory references. Any debt owed to an apartment community or a utility company must be paid before an application can be approved. First-time renters or applicants with less than one year landlord reference will be accepted with a qualified cosigner with guaranty if income and employment requirements are met.

CREDIT REQUIREMENTS: Credit history will be reviewed and no more than 50% of the total accounts reported can be over 60 days past due, or charged to collection in the past two (2) years.

ANIMALS: All animals are subject to management approval and apartment community policy.

CRIMINAL HISTORY: A person with a known felony conviction will not be accepted. Person(s) must exhibit no arrest, charge, or conviction involving crimes of violence, firearms, illegal drugs, theft, crime involving the theft or destruction of property, or any crime involving a minor. Person (s) who have been arrested for, charged with, or received deferred adjudication for a felony involving these crimes will not be accepted Person(s) convicted of a misdemeanor or who have been arrested for, charged with, or received deferred adjudication with respect to an offense that is sexual in nature, involves a minor, crimes of violence, stalking, public lewdness, and indecent exposure or involves weapons will not be considered.

A COSIGNER MAY BE REQUIRED IN THE CASE OF ONE OF THE FOLLOWING:

- 1. No verifiable income, full-time students or Senior Citizen.
- 2. Unsatisfactory credit rating
- 3. Rental history of less than one year.

If you do not meet one of the above criteria, you may be able to qualify for an apartment with a third party cosigner. The cosigner must fill out and pass the same application and screening process that you must pass, except that we will deduct the cosigner's own housing costs before applying his or her income to our income standard. Co-signors must live in the same state as the apartment and sign all lease documents.

AVAILABILITY POLICY: Apartments become available to prelease when the current resident submits a written notice to vacate.

WATER CONSERVATION: Residents at sub metered communities will be required to pay water.

I UNDERSTAND AND ACCEPT THESE QUALIFIYING STANDARDS AND HAVE TRUTHFULLY ANSWERED ALL / QUESTIONS FURTHER I UNDERSTAND THAT FALSIFICATION OF RENTAL APPLICATION INFORMATION WILL LEAD TO DENIAL OF RENTAL. THESE RENTAL CRITERIA ARE GUIDELINES, WHICH ENABLE US TO ACCEPT AS PROSPECTIVE RESIDENTS THOSE INDIVIDUALS WHO ARE CREDITWORTHY AND DO NOT HAVE A CRIMINAL BACKGROUND. THIS RENTAL CRITERIA DOES NOT ENSURE THAT ALL INDIVIDUALS RESIDING ON OR VISITING THE COMMUNITY CONFORM TO THESE GUIDELINES.

Applicant	Date	Applicant	Date

HP Ventures Group LLC – Development Services

3929 N Western Ave, Store N, Chicago, IL 60618 Phone: 630-405-2277 info@HPVenturesGroup.com www.hpvgproperties.com

Lease Application

Property Address:	Unit #:			
Expected Move in Date:	Rental Price: # of Additional Parking Spaces:			
Pets to Occupy the Premise: YES:	_ NO: If YES, pleas	e fill out Pet Application		
1st Applicant:				
Full Name:				
Social Security #:		Date of Birth:		
Current Address:Street How Long At Current Address?		City	Zip	
E-mail Address:	Phone Number:			
Current Landlord:	Phone:			
Current Employer:	Phone:			
Employer Address:Street Phone:		City	Zip s Name:	
Current Income:		Circle One:	Hourly Salary	
2 nd Applicant:				
Full Name:				
Social Security #:		Date of Birth:		
Current Address:Street How Long At Current Address?		City	Zip	
E-mail Address:	Phone Number:			
Current Landlord:	Phone:			
Current Employer:	Phone:			

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Employer Address:			
Street Phone:	Position:	City Supervisor's Nam	Zip e:
Current Income:		Circle One: How	urly Salary
Other Persons to Occupy Unit:			
1) Full Name:			
Social Security #:		Date of Birth:	
Relationship:			
		Date of Birth:	
Relationship:			
Primary Emergency Contact In	formation		
, ,			
Phone:			_
PLEASE READ:			
applicant warrants that the standard owner/Owner's Agent in decidence of the comparishment of the standard on the strength of	atements contained her iding whether to rent er occupancy of any Prop they are under the age of they are under the age of they are under the age of the agrees to pay an app	Lease as provided by Owner/Owner rein are true. The purpose of this to applicant. Receipt of this appliparty. Every person that will occupy of 18. The applicant agrees that if armay, at the option of the Owner/Ownerlication fee (as described above ble.	is application is to assist ication does not obligate the Property must fill out my information provided is mer's Agent, be terminated
background screening services) check, department of motor veh employers, and a credit check (as on the credit worthiness, credit of living of applicant and other application to speak with Owner releases any and all individuals we	to interview applicant's icles, prior eviction, unla s defined in the Fair Crec standing, credit capacity, er proposed occupants. Owner's Agent regarding tho provide information	nt hereby authorizes Owner/Owner references and/or previous landlore awful detainer records, past tenancy dit Reporting Act, 15 U.S.C. Sec. 168, character, general reputation, person The applicant hereby authorizes and applicant data presented in this appropries or facsimiles of this authorization.	ds, conduct a police records report, current and previous 31 a(d)), seeking information and characteristics, or mode any individual listed in this oplication. Applicant further licant also authorizes release
Signature:		Dat	e:

_Date:___

Signature: __

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LANDLORD VERIFICATION

(Complete one for each applicant)

Applicant's Contact Information:			
Name:Address:	Phone: ()	State:	Zio
Address.	City	State	_ zip
Landlord Information:*			
*1 year landlord verification required multiple forms	. If verification is need	ded from more than 1	landlord, please fill out
Landlord's Name:			
Address:Phone: ()	City:	State:	Zip:
Phone: ()	Fax: ()		
I have applied for an apartment with HF Please furnish them with the information to this matter.			
Signature:	Date:		
Current Landlord Response: Please provide information for the tenant	nt information/address	listed above under curre	ent landlord information.
1. Name(s) on lease:			
2. Date of occupancy: From		То	
3. Monthly rental amount:			
4. Has (had) he/she ever paid late?	How late?	# of late payments:	
5. Have (had) you ever had to begin evic	tion proceeding for not	npayment?	
6. Is their account in good standing?	If not, how much	do they owe?	
7. Does (did) the applicant interfere with	the rights and quiet en	joyment of other reside.	nts?
If Yes, Describe:			
8. Did he/she give you proper notice of	intent to move?		
9. Would you rent to this residential again	n?		
Signature & Title:		Date:	
Name:			
Thank you for taking your time to furnis will be used to determine acceptance for		tion. This information v	will be kept confidential and
Agent Signature:			

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EMPLOYMENT VERIFICATION

(Complete one for each applicant)

Applicant's Contact Information:			
Name:Address:	Phone: ()		
Address:	City:	State:	Zip:
Company Contact Information:			
Company Name:			
Address:	City:	State	e: Zip:
Phone: ()	Fax: ()		-
Supervisor's Name & Title:			
Supervisor's Phone: ()	Super	visors Email:	
Does someone other than your supervisinformation below:	sor need to be contacte	d to verify employs	ment? If so, please enter the
Name & Title:			
Name & Title: Email:		Fax: ()
Please furnish the information to process Signature: Employer Response: What is the aforementioned employee's portion of the process of th	Date:		
How long has the aforementioned employ	vee been employed by yo	ur company?	
What is the aforementioned employee's sa	ılary?	per: hou	ur/week/month/year
Additional Comments:			
Name:			
Signature & Title:		Date:	
Thank you for taking your time to furnish will be used to determine acceptance for r		n. This information	will be kept confidential and
Signature of Agent	Title		Date

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File Path: 5 - Employment Verification Form

Pet Application

Screening/Registration Fees

Tenant Name:

Pet owners must complete this form and be approved by Management prior to keeping a pet in the rental home. This form must be submitted with a photo of each pet to be considered for approval. If approved, a one-time non-refundable pet privilege fee must be paid for each pet. The pet privilege fees are \$200 for each dog and \$100 for each cat.

No animal(s) may be kept in the Apartment without prior written consent of Landlord. Landlord's right to consent shall be unconditional, with the following factors being taken into consideration with regard to the animal: size and weight, breed/pedigree and general personalities of the same, past history, and personality/disposition of the subject animal. No animals over 100 pounds will be permitted.

Apartment Address:					
Phone Number:					
Pet Information: Please list all pets sepa	rately				
<u>Pet's Name</u>	<u>Breed</u>	Weight	<u>Age</u>	Date of Last Rabies Shot	<u>License or ID</u> <u>Number</u>
A current color photo	graph must be attacl	hed.		1	
Pets Emergency Car	retaker (someone v	vho does n	ot live in	your household	1):
Name:			_ Phone	Number:	
Address:					
I have read over the P attest that all the infor false information will:	mation provided in result in my pet privi	this applicat ilege being 1	ion is tru evoked.	thful and underst	and that providing
Tenant Signature:				Date:	
Approved By:				Date:	
Denied By: Date:					
Reason for Denial:					

HPVG-DS Lease File Checklist

Re	sidential Lease Criteria (2 pages total)
Te	nant Application
La	ndlord Verification Form
En	nployment Verification Form
Pay	y stubs (1 month worth)/ W-2 or both)
A o	copy of a government issued photo ID
Ba	nk Statements (if necessary)
Hea	ating Cost Disclosure
Per	t Application (if necessary)
If Self-Emplo **Persons wh considered se	no hold jobs that are base salary plus commission, commission only, tipsorbonuses will be
Pro	evious year's personal income tax return
Pro	evious two months personal bank statements
Office check l	list
Ba	ckground Check
Cro	edit Check
Ev	riction Search
Address	Unit #
Signature to v	rerify that this has been reviewed and is complete: