

THINGS TO KNOW

- We are a **NO** pet community.
- We **only** accept Money Orders and Credit or Debit Cards

(No cash will be accepted)

Approval Process

Once you have decided to make one of our communities your home you must.

- Turn in a **fully** completed application signed by all parties over 17 years of age
- Provide **two** separate payments.
 1. \$20 **per** adult over 17 years.
 2. Pay the **deposit** amount.
- All parties over 17 must sign a **Criminal Consent** Form with the leasing Agent.
- Provide Picture **I.D.**

Get Ready to Move In

- A lease must be **signed** by all adults who will be living in the home.
- Show proof of **Utilities** in your name.
- Pay the 1st months **rent** in full.



Property Address: _____ Today's Date: _____
Desired Move-in Date: _____

APPLICANT INFORMATION

Full Name: _____
Last First Middle Maiden

DOB: _____ SS#: _____ DL#: _____

Home Phone: _____ Work: _____ Cell: _____

(Home)Email-Address: _____ (Work)Email-Address: _____

Marital Status: Single Married Divorced Separated Widowed How long? _____

Adults: _____ # Children: _____ Names: _____ Birthdate: _____
(who will be residing at the property) _____ Birthdate: _____
_____ Birthdate: _____

How did you hear about this property? _____

Applicant's Present Address: _____
Number Street Name

City State Zip Code How long? _____

Name of Landlord: _____ Phone: _____ Fax: _____

Rent Amount \$ _____ Reason for Leaving: _____

Applicants Previous Address: _____
Number Street Name

City State Zip Code How Long? _____

Name of Landlord: _____ Phone: _____ Fax: _____

Rent Amount \$ _____ Reason for Leaving: _____

Have you ever applied for rental at Arcovia Properties, Inc. _____ Yes _____ No

CO-APPLICANT INFORMATION

Full Name: _____
Last First Middle Maiden

DOB: _____ SS# _____ DL# _____

Home Phone: _____ Work: _____ Cell: _____

(Home)Email-Address: _____ (Work)Email-Address: _____

Marital Status: Single Married Divorced Separated Widowed How long? _____

Co-Applicant's Present Address: _____

Number Street Name
How long? _____
City State Zip Code

Name of Landlord: _____ Phone: _____ Fax: _____

Rent Amount \$ _____ Reason for Leaving: _____

Co-Applicant's Previous Address: _____

Number Street Name
How long? _____
City State Zip Code

Name of Landlord: _____ Phone: _____ Fax: _____

Rent Amount \$ _____ Reason for Leaving _____

Have you ever applied for rental at Arcovia Properties, Inc. _____ Yes _____ No

EMPLOYMENT INFORMATION

Applicant's Employer: _____ Phone #: _____

Length of Employment: _____ Position: _____

Employer Address: _____

Approx. Monthly Income: \$ _____ Name of Supervisor: _____

Supervisor's Telephone: _____

Co-Applicant's Employer: _____ Phone #: _____

Length of Employment: _____ Position: _____

Employer Address: _____

Approx. Monthly Income : \$ _____

Supervisor: _____ Supervisor's Phone #: _____

OTHER INCOME

Do you have any other form of income? _____ If so, what? _____

Amount per month \$ _____ Do you receive child support? _____ Amount per month \$ _____

Do you receive income from the government or disability? _____ Amount per month \$ _____

OTHER INFORMATION

Does anyone in the home smoke? _____ If so, who? _____

Have you ever been evicted or asked to vacate a property? _____

If so: County of eviction/request to vacate: _____ Eviction/request Date: _____

Reason for eviction/request to vacate: _____

Have you or anyone who will reside at your residence ever been arrested? _____ If so,

who and what charge? _____

How long ago? _____ Any arrests since then? _____ When? _____ What charge? _____

Do you or anyone at your residence have a criminal record? _____

Explain: _____

Have you or your spouse ever had your children removed from your home by Children's Services? _____

When? _____ Explain: _____

MONTHLY FINANCIAL COMMITMENTS

Who?	Amt. per month	Balance
1.		
2.		
3.		
4.		

BANK REFERENCE

Bank Name: _____ Phone#: _____ Checking #: _____

Savings #: _____ Address: _____

Bank Name: _____ Phone#: _____ Checking #: _____

Savings #: _____ Address: _____

SPECIAL VERIFICATIONS

Number of Cars: _____

Make _____ Year _____ Tag _____ State _____

Make _____ Year _____ Tag _____ State _____

Make _____ Year _____ Tag _____ State _____

Do you have a water bed? _____

Washer/Dryer rental (\$40 per mo.) _____

PERSONAL REFERENCES

Name: _____ Address: _____

Relation: _____ Phone: _____ How long? _____

Name: _____ Address: _____

Relation: _____ Phone: _____ How long? _____

AGREEMENT WITH ARCOVIA PROPERTIES

The following sum of \$ _____ has been paid for the application fee on (address) _____ and is non-refundable. Applicant has paid \$ _____ for the deposit on the above described property. If applicant is not approved, then the deposit will be returned. If applicant chooses not to go forward with the lease, the deposit is non-refundable. The above deposit will hold this unit for fourteen days from the date that the application is submitted.

I hereby authorize Arcovia Properties Inc. to obtain a consumer report and any other information it deems necessary for the purpose of evaluating my application. I understand that such information may include, but is not limited to, credit history, civil and criminal information, records of arrest, rental history, employment/salary and income details, vehicle records, licensing records and/or any other necessary information. "I hereby expressly release Arcovia Properties, Inc. and its agents and representation from any procurer of information may be provided to various local, state, and/or federal government agencies including any law enforcement. All intended occupants of the premises over 17 years of age will be listed as co-applicants.

Date

Applicant

Co-Applicant