

# Application for Residency

(Every additional live-in resident over the age of 18 as of the lease commencement date must submit a separate application and sign the lease)

**APPLICANT**

Full Name (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (MI) \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Home Phone Number (\_\_\_\_\_) \_\_\_\_\_ Cell Phone Number (\_\_\_\_\_) \_\_\_\_\_ Work Phone Number (\_\_\_\_\_) \_\_\_\_\_  
Area Code Area Code Area Code  
 E-mail Address \_\_\_\_\_ Gender \_\_\_\_\_ Marital Status \_\_\_\_\_ Smoker (Y / N) \_\_\_\_\_  
Male/Female Circle One  
 Education (List Highest Degree Earned) \_\_\_\_\_ Social Security Number \_\_\_\_\_  
 Proof of Identification: Type \_\_\_\_\_ Identification Number \_\_\_\_\_  
(Examples: Driver's License, Passport, etc.)  
 How did you hear about us? \_\_\_\_\_

**LIST OTHERS WHO WILL RESIDE IN APARTMENT ON A PERMANENT BASIS:**

(To be used only for additional live-in residents of apartment under the age of 18 as of the lease commencement date)

Full Legal Name	Social Security Number	Relationship to Applicant	Date of Birth
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**RESIDENCY INFORMATION** (please include at least 2 years of prior residences):

**Present Address:** \_\_\_\_\_ Apt # \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
Area Code  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Monthly Payment \$ \_\_\_\_\_  
 Rent or Own? \_\_\_\_\_ Dates: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month/Year Month/Year  
 Landlord/Lender Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
Area Code

**Previous Address:** \_\_\_\_\_ Apt # \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
Area Code  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Monthly Payment \$ \_\_\_\_\_  
 Rent or Own? \_\_\_\_\_ Dates: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month/Year Month/Year  
 Landlord/Lender Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
Area Code

**Additional Previous Address:** \_\_\_\_\_ Apt # \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
Area Code  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Monthly Payment \$ \_\_\_\_\_  
 Rent or Own? \_\_\_\_\_ Dates: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month/Year Month/Year  
 Landlord/Lender Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
Area Code

**Additional Previous Address:** \_\_\_\_\_ Apt # \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
Area Code  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Monthly Payment \$ \_\_\_\_\_  
 Rent or Own? \_\_\_\_\_ Dates: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month/Year Month/Year  
 Landlord/Lender Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
Area Code

**EMPLOYMENT INFORMATION** (please include at least 2 years of employment):

**Current Employer:**  
 Name \_\_\_\_\_ Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
Area Code  
 Employment Date: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_ Title \_\_\_\_\_ Gross Annual Salary \$ \_\_\_\_\_  
Month/Year Month/Year  
 Supervisor Name \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
Area Code

**EMPLOYMENT INFORMATION** (cont'd):



**Previous Employer:**

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Area Code

Employment Date: From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_ Title \_\_\_\_\_ Gross Annual Salary \$ \_\_\_\_\_  
Month/Year Month/Year

Supervisor Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Area Code

**OTHER INCOME:**

Type of Income	Source/Bank	Gross Annual Amount
_____	_____	\$ _____
_____	_____	\$ _____

**Relative/Emergency Contact (Not Residing With You):**

1. Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home Phone Number (\_\_\_\_) \_\_\_\_\_ Work Phone Number (\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_  
Area Code Area Code

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

2. Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home Phone Number (\_\_\_\_) \_\_\_\_\_ Work Phone Number (\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_  
Area Code Area Code

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

VEHICLES:	Make	Model	Color	License #	State	Year
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

PETS:	Name	Type	Gender	Mature Weight (lbs.)	Breed	Color	Age
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

**NOTE:** Keeping of pet or animal requires consent of management, payment of applicable fees/deposits, and execution of Pet/Animal Addendum. In specific circumstances, certain animals may be kept for limited purposes pursuant to Landlord's policies, such as animals used for individuals with disabilities and official police dogs. For further details, please refer to Landlord's pet and community policies.

**Disclosures**

The Civil Rights Act of 1968, as amended by the Fair Housing Act Amendments of 1988, prohibits discrimination in housing based on race, color, national origin, religion, sex, handicap, or familial status. The management of this property is committed to complying with the letter and spirit of the laws which provide an equal housing opportunity to all. The federal agency which administers compliance with the fair housing laws is the United States Department of Housing and Urban Development.

**Certifications for Residency Application**

**Application Fee**

I hereby agree, in the event of the approval of this application, to execute a lease in accordance with the terms set forth in this rental application and my rental liability shall commence pursuant to the terms of the lease. I agree that the \$45.00 application fee, which is comprised of \$45.00 to cover Landlord's out-of-pockets costs associated with processing the application and \$45.00 to cover Landlord's administrative and overhead costs allocable to processing of the application, accompanying this application shall be retained by Landlord to cover Landlord's various costs of evaluating my application, whether or not Landlord approves my application, or whether or not I sign a lease or take possession of an apartment home, and I agree to this amount being retained by Landlord as a reasonable estimate of the actual costs to Landlord to evaluate my application. (I also do not believe the amount of this application fee is an unfair trade practice). I understand that the application fees accompanying this application are non-refundable after I execute this application and will not be applied against the security deposit or any rent payable pursuant to the lease. Landlord and/or agent for Landlord reserve the right to reject this application and to refuse possession of the below-mentioned accommodation.

**Holding Fee**

In addition to the foregoing application fee, I agree that the \$00.00 holding fee accompanying this application shall be retained by Landlord to hold the unit identified on page three of this application for occupancy by the undersigned upon approval of this application and execution of a lease. If this application is rejected for any reason other than the falsification of information by applicant, the foregoing holding fee shall be refunded to the undersigned. If my application is accepted, but I notify Landlord that I do not desire to lease the unit within 72 hours after Landlord notifies me in person or by telephone that my application has been accepted, then Landlord will refund the holding fee to me. Otherwise, Landlord shall be entitled to retain the holding fee to cover Landlord's various costs of holding such unit for me, and I agree to this amount being retained by Landlord as a reasonable estimate of the actual costs to Landlord to hold the unit for my occupancy. (I also do not believe the amount of this holding fee is an unfair trade practice). I understand that, if I occupy the unit, the foregoing holding fee will be applied against the security deposit, and, if any amount of the holding fee exceeds the amount of the security deposit, such excess shall be applied against the rent payable pursuant to the lease.

**Administrative Fee**

In addition to the foregoing application fee and holding fee, I agree that the \$150 administrative fee accompanying this application shall be retained by Landlord to cover Landlord's various costs of processing the undersigned's occupancy of the unit. If this application is rejected for any reason other than the falsification of information by applicant, the foregoing administrative fee shall be refunded to the undersigned. If my application is



accepted, but I notify Landlord that I do not desire to lease the unit within 72 hours after Landlord notifies me in person or by telephone that my application has been accepted, then Landlord will refund the administrative fee to me. Otherwise, Landlord shall be entitled to retain the administrative fee to cover Landlord's various costs of processing such unit for occupancy by me, and I agree to this amount being retained by Landlord as a reasonable estimate of the actual costs to Landlord to process such unit for my occupancy. (I also do not believe the amount of this administrative fee is an unfair trade practice). I understand that, if I occupy the unit, the foregoing administrative fee will not be applied against the security deposit or any rent payable pursuant to the lease, but rather shall be retained by Landlord for the costs of processing the undersigned's application. If Landlord returns the administrative fee, then, at the option of Landlord, Landlord may do so by one check payable and delivered to any applicant or one check jointly payable to all applicants but delivered to only one applicant for the unit.

**Any unanswered "yes" or "no" question shall result in the denial of your application.**

Have you or any member of your household ever been convicted of or pled guilty or "no contest" to any felony?

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

Have you or any member of your household ever been convicted of or pled guilty or "no contest" to a sexual offense?

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

Have you or any member of your household ever been listed on a registry of sexual offenders?

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

Have you or any member of your household ever been convicted of or pled guilty or "no contest" to any drug-related criminal offense?

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

Are you or any member of your household a Specially Designated National or other Blocked Person designated by the United States government as a person who commits or supports terrorism or is involved in international narcotics trafficking?

\_\_\_\_\_ Yes                      \_\_\_\_\_ No

If yes to any of the above questions, please explain, providing the location, date and nature of the offense:

\_\_\_\_\_

\_\_\_\_\_

I have read the foregoing, certify that the information herein is TRUE and CORRECT, that this application is submitted for the purpose of inducing approval of this application on my behalf.

By signing this application, I authorize Landlord or agent for Landlord to verify any information contained herein. Any "yes" response to the personal and criminal history questions above, or any false statement on the application, will lead to the rejection of my application and/or immediate termination of my lease. Further, if I subsequently am involved in conduct which would result in a "yes" response to any of the questions set forth above (even after I sign the lease and take possession of the apartment home), I understand that Landlord may terminate the Lease.

Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

Management Representative Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR COMMUNITY ADMINISTRATIVE PURPOSES:**

Check if on Wait List      Wait List Expiration Date (if needed) \_\_\_\_\_

Community # **222** Community Name: **Wilson Acres** Date \_\_\_\_\_

Address: \_\_\_\_\_ Unit # \_\_\_\_\_ Requested Move-In Date \_\_\_\_\_

Application Result: \_\_\_\_\_ Date Applicant Notified of Result: \_\_\_\_\_

Who Notified the Applicant of Result: \_\_\_\_\_ Notification Method: \_\_\_\_\_



**Consent to Consumer Report and Background Check**

This is to inform applicant that, as part of Landlord's procedure for processing applicant's application, an Investigative Consumer Report may be prepared whereby information is obtained through personal interviews with applicant's landlord, employer, or others with whom applicant is acquainted. This also is to inform applicant that, as also set forth in the lease applicant will execute if applicant's application is approved by Landlord, similar Investigative Consumer Reports may be prepared in the future after applicant has executed the lease and become a resident or has vacated the property which is the subject of this agreement. These inquiries include information as to applicant's character, general reputation, personal characteristics, mode of living and credit report. The federal Fair Credit Reporting Act requires Landlord to provide to applicant additional information about the nature and scope of the investigation if applicant provides Landlord with a written request within a reasonable time. Landlord has attached a summary of applicant's rights under the Fair Credit Reporting Act.

I, \_\_\_\_\_, the undersigned applicant authorize Wilson Acres, or its agent, attorney or assign to order and review one or more consumer reports relating to me (including, but not limited to, credit history, rental history (including with other properties owned by property owners affiliated with Landlord), and criminal history). I further authorize Wilson Acres, its agent, attorney or assign to order or prepare, and review, investigative consumer reports relating to me. I understand and authorize Wilson Acres, its agent, attorney or assign to continue to obtain or prepare consumer reports and investigative consumer reports on me both during the duration of any lease or agreement I may enter into as a result of this application and at any time thereafter, including for the purposes of collection of amounts I may owe under any lease or other agreement. I further authorize and direct all employers, financial institutions, banks, creditors, residential managers/landlords to release any and all information relating to me to Wilson Acres or its agent, attorney or assign. I acknowledge that I have received a summary of my rights under the Fair Credit Reporting Act.

I further understand and authorize Wilson Acres to obtain and use consumer report information relating to me (including, but not limited to, a credit score) for the purpose of conducting research into statistical credit models and evaluating the performance of various scoring models and sources of consumer reporting information, including, but not limited to, criminal conviction and skip tracing/eviction databases.

Signature \_\_\_\_\_ Print Name \_\_\_\_\_  
SSN \_\_\_\_\_ Date \_\_\_\_\_

## A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness, and privacy of information in the files of every "consumer reporting agency" (CRA). Most CRAs are credit bureaus that gather and sell information about you -- such as if you pay your bills on time or have filed bankruptcy -- to creditors, employers, landlords, and other businesses. You can find the complete text of the FCRA, 15 U.S.C. 1681-1681u, at the Federal Trade Commission's web site (<http://www.ftc.gov>). The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or a state attorney general to learn those rights.

- **You must be told if information in your file has been used against you.** Anyone who uses information from a CRA to take action against you -- such as denying an application for credit, insurance, or employment -- must tell you, and give you the name, address, and phone number of the CRA that provided the consumer report.
- **You can find out what is in your file.** At your request, a CRA must give you the information in your file, and a list of everyone who has requested it recently. There is no charge for the report if a person has taken action against you because of information supplied by the CRA, if you request the report within 60 days of receiving notice of the action. You also are entitled to one free report every twelve months upon request if you certify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.
- **You can dispute inaccurate information with the CRA.** If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report its findings to the CRA. (The source also must advise national CRAs -- to which it has provided the data -- of any error.) The CRA must give you a written report of the investigation, and a copy of your report if the investigation results in any change. If the CRA's investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.
- **Inaccurate information must be corrected or deleted.** A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after you dispute it. **However, the CRA is not required to remove accurate data from your file unless it is outdated (as described below) or cannot be verified.** If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address and phone number of the information source.
- **You can dispute inaccurate items with the source of the information.** If you tell anyone -- such as a creditor who reports to a CRA -- that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you've notified the source of the error in writing, it may not continue to report the information if it is, in fact, an error.
- **Outdated information may not be reported.** In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcies.
- **Access to your file is limited.** A CRA may provide information about you only to people with a need recognized by the FCRA -- usually to consider an application with a creditor, insurer, employer, landlord, or other business.
- **Your consent is required for reports that are provided to employers, or reports that contain medical information.** A CRA may not give out information about you to your employer, or prospective employer, without your written consent. A CRA may not report medical information about you to creditors, insurers, or employers without your permission.
- **You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers.** Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll-free phone number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the lists for two years. If you request, complete, and return the CRA form provided for this purpose, you must be taken off the lists indefinitely.
- **You may seek damages from violators.** If a CRA, a user or (in some cases) a provider of CRA data, violates the FCRA, you may sue them in state or federal court.

The FCRA gives several different federal agencies authority to enforce the FCRA:

FOR QUESTIONS OR CONCERNS REGARDING:	PLEASE CONTACT:
CRAs, creditors and others not listed below	Federal Trade Commission Consumer Response Center - FCRA Washington, DC 20580 1-877-382-4367 (Toll-Free)
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Programs Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-518-6360
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Division of Compliance & Consumer Affairs Washington, DC 20429 800-934-FDIC
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator - GIPSA Washington, DC 20250 202-720-7051



<input type="checkbox"/>	<b>NEW</b>
<input type="checkbox"/>	<b>Update/Change</b>
<input type="checkbox"/>	<b>Delete</b>
<input type="checkbox"/>	<b>Other</b>

## Automatic Payment Option Enrollment Form and Agreement

### Step 1: General Information (Please Print)

AIMCO Community (Lessor): Tar River Estates

Name (Lessee): \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Apt. \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Amount to Debit: \$ \_\_\_\_\_ Draft Day (1 – 31 or Last Day of Month): \_\_\_\_\_

Start Date (mm/yyyy) \_\_\_\_\_ End Date (mm/yyyy) \_\_\_\_\_

### Step 2: Payment Information

Check here if Name, Address and Phone Numbers are same as

Account Holder's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Apt. \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Bank Account number (up to 17 digits): \_\_\_\_\_ Routing number (9 digits) : \_\_\_\_\_

### Step 3: Terms and Conditions

I (Lessee) hereby authorize the AIMCO Community named above (Lessor) to debit the amount of the designated expense from the checking account indicated above for the payment of rent, utility, or other assigned expense for the apartment unit listed. I understand that these charges will be made on the first day of the month rent is due, beginning on the Start Date indicated. I agree to pay off all remaining rents due according to the terms and conditions of the Lease Agreement.

In the event the checking account cannot cover the payment for any reason, I understand that I remain responsible for all rents due according to the Terms and Conditions of the Lease Agreement. I understand that I must also provide the Lessor 30 days' written notice to stop the use of this service. All applicable late and NSF fees will apply on returned items according to the Lease Agreement. Upon expiration of these Terms and Conditions, all remaining rents are due according to the Terms and Conditions of the Lease Agreement. These Terms and Conditions will become part of the Lease Agreement and permanent resident file.

**Lessee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Step 4: OFFICE USE ONLY

Date: \_\_\_\_\_ Collection Cycle Date: \_\_\_\_\_

Community Name Tar River Estates Resident ID # \_\_\_\_\_

Community Manager Liza Davis Payment Code - CK