

Colonial Gardens Rental Application

Apartment Number _____	Rent Amount _____	Pet Rent _____	Source _____
Style _____	Sec. Deposit _____	Pet Fee _____	
Lease Term _____	Occupancy Date Requested _____		
Sure Deposit _____	Leased By: _____		
APPLICATION OF (circle one):			
Leaseholder-Resident	Occupant Only	Non-Occupant Leaseholder	Co-Signer

APPLICANT INFORMATION MUST BE COMPLETE IN ORDER TO BEGIN PROCESSING

Applicant's Legal Name _____ Telephone Number _____

Social Security Number _____ ~ _____ ~ _____ Date of Birth ____/____/____

Present Address: _____ Apartment # _____ City/State/Zip _____

How long? _____ Rent ___ Own ___ Live with Family ___ Other ___ Monthly Payment \$ _____

Reason for moving from present address? _____

Name of present Landlord / Owner / Agent? _____ Telephone Number _____

Previous Address: _____ Apartment # _____ City/State/Zip _____

How long? _____ Rent ___ Own ___ Live with Family ___ Other ___ Monthly Payment \$ _____

Reason for moving from previous address? _____

Name of present Landlord / Owner / Agent? _____ Telephone Number _____

Present Employer: _____ Name of Supervisor _____

Address of Employment: _____ City/State/Zip _____

Telephone Number _____

Start Date: _____ Position Held _____ GROSS ANNUAL SALARY \$ _____

Previous Employer: _____ Name of Supervisor _____

Address of Employment: _____ City/State/Zip _____

Telephone Number _____

Start Date: _____ Position Held _____ GROSS ANNUAL SALARY \$ _____

Spouse's Legal Name _____ Social Security Number _____ - _____ - _____ Date of Birth ____/____/____

Spouse's Present Employer: _____ Name of Supervisor _____

Address of Employment: _____ City/State/Zip _____

Telephone Number _____

Start Date: _____ Position Held _____ GROSS ANNUAL SALARY \$ _____

ADDITIONAL SOURCES OF INCOME

List any additional verifiable source(s) of household income you wish us to consider : _____ \$ _____ per _____

Do you have any established credit history such as accounts with auto loans, credit or charge card accounts, etc...? Yes ___ No ___

Have you ever been evicted? Yes ___ No ___

Have you ever been convicted of a felony? Yes ___ No ___

How many automobiles do you have? _____ Tag Number(s) and State _____

Do you have any recreational vehicles such as boats, motorcycles? Yes ___ No ___ If yes, please specify: _____

Do you have a pet? Yes ___ No ___ Type and / or Breed of Pet _____ Weight _____ Age _____ Name of Pet _____

Colonial Gardens does allow pets. A maximum of three pets per apartment to include only one large dog. Dogs must be at least six (6) months old and have a current dog license. Cats must be at least six (6) months old, spayed or neutered, and the front paws must be declawed and/or capped. Written verification must be provided from a veterinarian along with a photo of your pet(s). **There is a \$200 one-time non-refundable pet fee per cat, as well as a \$15 monthly charge per cat.**

There is a \$300 one-time non-refundable pet fee per dog 39 pounds and under, as well as a \$25 monthly charge per dog. There is a \$400 one-time non-refundable fee for a pet 40 pounds and over, as well as a \$ 35 monthly charge for the dog. Fish and small caged animals are allowed (no rodents, reptiles or farm animals) at no additional costs

All pets 40 Pounds and over MUST BE ON THE FIRST (1ST) FLOOR

Note: Per Federal Fair Housing Law, Service Animals are not Considered "pets" therefore, with proof of certification, the Pet Pricing does not apply.

PLEASE LIST TWO EMERGENCY CONTACTS:

#1 Name _____ Relationship _____ Known How Long? _____

Telephone Number _____

#2 Name _____ Relationship _____ Known How Long? _____

Telephone Number _____

Co-applicants must submit separate applications.

A non-refundable application fee of **\$25** is paid with the clear understanding that the applicant, including each prospective occupant, is subject to approval and acceptance of Colonial Gardens, L.P. **The application fee is used to cover the costs incurred in investigating the acceptability of this application and is non-refundable.**

Upon receipt by Colonial Gardens, L.P. of this application, and advance rental payment payable to Colonial Gardens in the amount of **\$200** will be paid by the applicant to hold the specific apartment selected.

Once the application has been accepted and approved, any cancellation of the application and/or failure to sign a lease by the applicant on or before the occupancy date specified will be considered a breach of this application. **In this event, the \$200 advance rental payment shall be retained by Colonial Gardens, L.P. and applied to the loss of rent from the applicant's action.**

Upon execution of the lease and transfer of the possession of the apartment, the balance of the first month's rent and a security deposit is due. If applicant takes occupancy after the 25th of any month, the prorated portion of that month's rent as well as the following month's rent, is due.

Proof of Renters Insurance is required before Colonial Gardens, L.P. will issue keys.

If statements or representations made on this application are found to be materially misleading, incorrect or untrue, Colonial Gardens, L.P. shall be entitled to terminate this application.

Upon approval, this application is to be made a part of the lease entered into by Colonial Gardens, L.P. and tenant.

I agree to provide the appropriate application information, income verification and/or any other required documentation within 24 hours in order to assist in timely processing of my application.

I understand that by signing below, I am agreeing to the terms and conditions set forth in this application.

Date Received: _____ Signature of Applicant(s) _____

Received By _____

List the legal name of all prospective occupants beginning with yourself:

1. Name _____ Relationship _____ Date of Birth ___/___/___

2. Name _____ Relationship _____ Date of Birth ___/___/___

3. Name _____ Relationship _____ Date of Birth ___/___/___

4. Name _____ Relationship _____ Date of Birth ___/___/___

Credit dept.

ACCEPTED by _____ date _____ time _____ **DENIED** by _____ date _____ time _____ Reason _____ Letter _____