



Phone: 330.494.6596 Fax: 330.494.5186
Email: leasing@shakertownapartments.net

APPLICATION QUALIFICATIONS

(TO BE ATTACHED TO RENTAL APPLICATION)

TO PROCESS YOUR APPLICATION FOR YOUR NEW HOME

- 1. Reservation deposit of \$100.00, which is applied toward your security deposit, if accepted
2. Two (2) most recent pay stubs per applicant
3. Positive identification, driver's license or equivalent, verified by agent
4. Complete and accurate application

QUALIFICATIONS

- 1. Applicant's gross monthly income MUST be at least three (3) times the monthly rent of the apartment you are applying for.
2. The total of applicant's monthly debt obligations and monthly rent of the apartment applying for MUST NOT exceed 34%/38% of the gross monthly income.

If the applicant does NOT meet these 2 qualifications, the application will not be approved and the applicant will be refunded \$75.00. If the applicant decides not to take the apartment after the credit check and approval, the applicant will forfeit the entire \$100.00.

SECURITY DEPOSIT

- 1. An amount equal to one (1) months' full rent will be required for a security deposit.
2. The application fee of \$100.00 will be applied towards the security deposit if the application is accepted.

CREDIT REPORTS AND CRIMINAL RECORDS CHECKS

Credit reports and criminal records checks are mandatory and will be completed for ALL applicants. Pertinent information need on the Rental Application include:

Full names of all persons intending to reside in the unit. ALL ADULT PERSONS RESIDING IN THE APARTMENT MUST BE NAMED ON THE

- 1. LEASE AND MUST COMPLETE A SEPARATE APPLICATION.
2. Social Security numbers of all persons
3. Current and previous addresses.
4. Name and telephone number of previous landlord
5. Current employment, title, salary, and name of supervisor
6. Automobile information to include make, model, and license plate number

Poor credit rating, civil suits, collection, bankruptcy or poor payment records may be disqualifying factors. Additionally, any false information is grounds for rejecting an application.

I certify the Rental Application information provided is true and complete to the best of my knowledge. I hereby provide authorization to obtain and verify my employment, perform criminal and credit history checks, and obtain credit reports in connection with this application. In addition, I authorize the landlord, its' agents, and/or attorneys to obtain credit reports and information at any time during and after my tenancy, in the event of a breach of any lease or term of tenancy.

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Applicant: \_\_\_\_\_ Date: \_\_\_\_\_



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## APPLICATION FOR RENTAL

*FOR SHAKERTOWN OFFICE USE ONLY								
Apartment	Type	Move In Date	Lease Term	Rent	Pet	Furniture	STF	Agent

**NOTICE: All Adult Applicants (18 Years or Older) Must Complete A Separate Application for Rental**

### APPLICANT INFORMATION

**Name:** \_\_\_\_\_  
(First) (M.I.) (Last)

**SSN** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_      **DOB** \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Month) (Day) (Year)

**Telephone:** (H) \_\_\_\_\_  
 (Work) \_\_\_\_\_  
 (Cell) \_\_\_\_\_

**Email:** \_\_\_\_\_

**DR LIC#** \_\_\_\_\_ (ST) \_\_\_\_\_

### CURRENT ADDRESS

**Address:** \_\_\_\_\_  
(Street) (City) (ST) (Zip)

**Present Landlord:** \_\_\_\_\_      **Telephone:** \_\_\_\_\_

Dates of Occupancy		Monthly Rent	Type of Structure		Reason For Leaving
From	To		<input type="checkbox"/> House	<input type="checkbox"/> Room	
			<input type="checkbox"/> Apartment	<input type="checkbox"/> Other	

### PREVIOUS ADDRESS

**Address:** \_\_\_\_\_  
(Street) (City) (ST) (Zip)

**Present Landlord:** \_\_\_\_\_      **Telephone:** \_\_\_\_\_

Dates of Occupancy		Monthly Rent	Type of Structure		Reason For Leaving
From	To		<input type="checkbox"/> House	<input type="checkbox"/> Room	
			<input type="checkbox"/> Apartment	<input type="checkbox"/> Other	

### EMPLOYMENT RECORD FOR THE PAST FIVE (5) YEARS

**Present Employer:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
(Street) (City) (ST) (Zip)

How Long		Occupation	Salary	Start Date	Telephone
From	To				

**Previous Employer:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
(Street) (City) (ST) (Zip)

How Long		Occupation	Salary	End Date	Telephone
From	To				

1. Other Income Description	Monthly Income \$
2. Other Income Description	Monthly Income \$

**OTHER OCCUPANTS**

List Names and Birthdates of **ALL ADDITIONAL OCCUPANTS 18 YEARS OR OLDER**

List Names and Birthdates of **ALL ADDITIONAL OCCUPANTS 18 YEARS OR YOUNGER**

**PETS**

**Pets?**      Yes                  No                                  **If So, Describe**

**Please Initial:**      I understand that Dogs and Exotic pets are not permitted.      \_\_\_\_\_

                                 I understand that one cat is permitted with a Signed Pet Agreement      \_\_\_\_\_

                                 and NON REFUNDABLE \$200.00 Pet Fee is Paid.      \_\_\_\_\_

**EMERGENCY CONTACT**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Relationship: \_\_\_\_\_

**BACKGROUND INFORMATION**

Have you ever been evicted?      Yes      No      Have you ever been convicted of anything other than a traffic violation?      Yes      No

Have you ever filed for Bankruptcy?      Yes      No      We DO NOT insure your personal property. Do you presently have personal property insurance?      Yes      No

**VEHICLE INFORMATION**

	Make and Model	Year	State	License
1				
2				

**OTHER INFORMATION**

How did you hear about Shakertown Apartments? \_\_\_\_\_

How many Apartment Communities did you look at before deciding to relocate to Shakertown? \_\_\_\_\_

Where did you look? \_\_\_\_\_

The undersigned warrants and represents that he/she has read this application and that all statements herein are true and agrees if accepted to execute upon presentation a lease agreement in the usual form and on the terms and conditions herein stated, which lease or agreement may be terminated by the lessor if any statement made herein is not true. Each applicant must approve this application.

Fair Credit Reporting Act Pre-Notification

This is to advise you that part of our procedures for processing your application may include an investigative report whereby information is obtained through personal interviews with third parties, such as business associates, financial sources or friends. This inquiry includes information as to your character, general reputation, personal characteristics, and mode of living. You have the right to make a written request within a reasonable period of time for a complete disclosure of information concerning the nature and scope of the investigation. **YOUR RESERVATION DEPOSIT WILL NOT BE REFUNDABLE**, unless notification of cancellation of this application is made within 48 hours of viewing the apartment and signing the application.

Signature \_\_\_\_\_ Date: \_\_\_\_\_



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## RESERVATION AND APPLICATION DEPOSIT

(TO BE ATTACHED TO RENTAL APPLICATION)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

I (We) the undersigned, do hereby make application to reserve the following rental apartment residence as designated on plans shown to me in the Sales Office.

Apartment: \_\_\_\_\_

Apartment Monthly Rent: \_\_\_\_\_

We request your acceptance of our check in the amount of \$100.00 for a Reservation Deposit. In the event this application is rejected by the Landlord, for any reason, the deposit amount stated above will be refunded less an application fee of \$25.00 per applicant, without interest and neither party shall have obtained any legal rights or obligations hereby. **If the Reservation is canceled by the applicant, the entire deposit is non-refundable.**

Amount Received: \$ \_\_\_\_\_

Check Number: \_\_\_\_\_

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Co-Applicant: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_