

SOUTHRIDGE COMMONS

2319 Old Romney Road, Lafayette, IN 47909

Telephone 765-807-6835 / Fax 765-807-6269

RENTAL HOUSING APPLICATION

Applicant Name:		
Co-Applicant Name (if applicable-additional application required):		
<input type="checkbox"/> New Application	<input type="checkbox"/> Household Addition	<input type="checkbox"/> Transfer

Date:	Time:	Phone:
Name:		
Address:		
<small>(Street)</small>	<small>(City)</small>	<small>(State) (Zip)</small>
Marital Status:	<input type="checkbox"/> Divorced	<input type="checkbox"/> Widowed
	<input type="checkbox"/> Married	<input type="checkbox"/> Single (Never Married)
		<input type="checkbox"/> Separated
Driver's License Number:	State License Issued:	

Household Information (list all persons that will be occupying the unit)

Name <small>First, Middle Initial, Last</small>	Relationship to Head of Household	Birth Date	Social Security Number	Employed	Student
				Y / N	Y / N
				Y / N	Y / N
				Y / N	Y / N
				Y / N	Y / N
				Y / N	Y / N
				Y / N	Y / N
				Y / N	Y / N
				Y / N	Y / N
				Y / N	Y / N
				Y / N	Y / N

Rental History (Last two years)

Current Landlord:			Phone:		
Landlord Address:		City:	State:	Zip:	
Date Occupied:	From:	To:	Related? Y / N	How?	
Current Landlord:			Phone:		
Landlord Address:		City:	State:	Zip:	
Date Occupied:	From:	To:	Related? Y / N	How?	



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Employment History					
Current Employer:				Phone:	
Address:			City:		State: Zip:
Dates Employed:	From:	To:	Gross Wages (Monthly): \$		
Previous Employer:				Phone:	
Employer Address:			City:		State: Zip:
Dates Employed:	From:	To:	Gross Wages (Monthly): \$		

General Questions		
YES	NO	
<input type="radio"/>	<input type="radio"/>	1. Have you or any household member ever been convicted of a felony or misdemeanor which would disqualify in accordance with the resident selection criteria?
<input type="radio"/>	<input type="radio"/>	2. Have you ever been evicted? If yes, reason:
<input type="radio"/>	<input type="radio"/>	3. Have you or any household member been arrested/convicted of a drug related crime?
<input type="radio"/>	<input type="radio"/>	4. Does anyone not listed in the household composition, on page 1, plan to live with you in the next 12 months?
		Name & Relationship: _____
		Explanation: _____
<input type="radio"/>	<input type="radio"/>	5. Does your household have or anticipate having any pets other than those used as a service animal? If yes, please explain below.

Character References (List a personal reference other than a relative)

Name: _____

Address: _____

Phone: _____ Relationship: _____ Years Known: _____



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Vehicle Information (Please list vehicles separately)

Unauthorized vehicles may be towed at the owner's expense.

Owner #1: _____

Make (i.e. Ford): _____ Model (i.e. Mustang): _____

License #: _____ State: _____ Color: _____

Owner: #2: _____

Make (i.e. Ford): _____ Model (i.e. Mustang): _____

License #: _____ State: _____ Color: _____

Emergency Contact Number (In case of emergency, please notify)

Name: _____

Address: _____

Home Phone: _____ Work Phone: _____ Cell: _____

Non-Refundable Application Fee

INITIALS _____ I have paid herewith a NON-REFUNDABLE application fee of \$25.00 to partially defray Landlord's costs in connection with processing this application. I understand this amount will not be returned to me, whether or not I lease (or am approved to lease) an apartment.

Holding Fee

INITIALS _____ In addition to the application fee, I have paid a "Holding Fee" in the amount of \$100 (30 day hold) or \$300 (45 day hold). An apartment will be held upon receipt of this fee. Once your application is approved, the Holding Fee will be applied to your move in costs. The Holding Fee is non-refundable after 24 hours of your application date and will not be refunded for not meeting the landlord, criminal or credit requirements or any other portion of the resident criteria. If your application is declined or if applicant cancels after twenty-four (24) hours, the Holding Fee will be used to partially defray the Landlord's costs of processing the application/lease. If an application is declined for ANY reason a 90-day wait period is required before reapplying to this property.

I hereby authorize Landlord to conduct a check of my credit, references, employment and arrest or criminal records, and I hereby expressly authorize any law enforcement agency to release my criminal history, if any. I further hereby authorize Landlord to conduct such investigation it deems reasonably necessary to verify the accuracy of any of the information contained in this application or in any application provided by a co-applicant. A faxed or electronic copy of this authorization shall be as valid as the original.

Applicant certifies the above information is true and accurate and understands that false or inaccurate information shall be cause for denial of this application or termination of any subsequent rental agreements. I/We are the only person(s) who will reside in the apartment if this application is approved. Apartment owner or agents may verify all information given directly or through reporting agencies. Acceptance of the application is not binding on apartment owner or agent until approved in writing.

Head Signature: _____ Date: _____

Co-head Signature: _____ Date: _____

Applicant Signature: _____ Date: _____

Applicant Signature: _____ Date: _____

Applicant Signature: _____ Date: _____

Applicant Signature: _____ Date: _____

Agent's Signature: _____ Date: _____

