

HORNET RESIDENTIAL – APPLICATION FOR OCCUPANCY

OFFICE USE ONLY				
Leasing Agent	Name of Property	Rental Rate	Move-In Date	
Roommate	1 st preference	2 nd preference	3 rd preference	

PLEASE READ BEFORE COMPLETING THIS APPLICATION: Applicant should answer ALL questions COMPLETELY
 (including where references may be reached Monday - Friday from 8:00 am to 5:00 pm). INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED!

APPLICANT INFORMATION			EMAIL:		
LAST NAME	FIRST NAME	MIDDLE	PHONE	BIRTHDATE	SSN
SPOUSE'S INFORMATION			EMAIL:		
LAST NAME	FIRST NAME	MIDDLE	PHONE	BIRTHDATE	SSN
NAMES AND AGES OF CHILDREN					
PARENT INFORMATION – For Emergency Purposes					
NAME		ADDRESS		PHONE NUMBER	
RESIDENTIAL INFORMATION					
CURRENT ADDRESS					
STREET ADDRESS AND APT. NUMBER		CITY	STATE	ZIP	HOW LONG? From To
NAME OF LANDLORD OR MORTGAGE CO.		ADDRESS-LANDLORD		PHONE-LANDLORD	RENT PAID
PREVIOUS ADDRESS					
STREET ADDRESS AND APT. NUMBER		CITY	STATE	ZIP	HOW LONG? From To
NAME OF LANDLORD OR MORTGAGE CO.		ADDRESS-LANDLORD		PHONE-LANDLORD	RENT PAID
PREVIOUS ADDRESS					
STREET ADDRESS AND APT. NUMBER		CITY	STATE	ZIP	HOW LONG? From To
NAME OF LANDLORD OR MORTGAGE CO.		ADDRESS-LANDLORD		PHONE-LANDLORD	RENT PAID
Have you ever refused to pay rent?		Ever been evicted?		Ever convicted of a felony?	
If so, please explain:					
APPLICANT'S EMPLOYMENT					
EMPLOYER		ADDRESS		CITY	STATE ZIP
POSITION		HOW LONG? From To		MONTHLY INCOME – NET	PHONE
SPOUSE'S EMPLOYMENT					
EMPLOYER		ADDRESS		CITY	STATE ZIP
POSITION		HOW LONG? From To		MONTHLY INCOME – NET	PHONE
AUTOMOBILE INFORMATION					
Year	Make	Model	Color	Tag No.	
Year	Make	Model	Color	Tag No.	
SOURCE OF OTHER INCOME		HOW MUCH PER MONTH		DURATION OF INCOME	
SOURCE OF OTHER INCOME		HOW MUCH PER MONTH		DURATION OF INCOME	

By signing, the applicant releases the management company to conduct an investigative report to determine the eligibility of applicant. This inquiry includes information as to character, credit, and mode of living. This application may be denied as a result of any misrepresentation or insufficient information as a result of an incomplete Application. Applicant has the right to make a written request within a reasonable period of time to receive additional information as to the nature and scope of this investigation.

APPLICANT'S SIGNATURE _____

DATE _____

SPOUSE'S SIGNATURE _____

DATE _____



TENANT SELECTION POLICY

It is our policy to strictly adhere to all fair housing laws under Title VIII of the Civil Rights Act of 1968 as amended by the Housing and Community Development Act of 1974. No Applicant shall be discriminated against or denied housing because of race, color, religion, sex, national origin, familial status or disability.

Screening of Applicant(s) will include a minimum income requirement equal to three times the total unit charges, number of people who will be residing in the unit, employment history, rental or mortgage history, credit bureau report and public records. Tenant selection will be based upon information ascertained during the screening.

APPLICATION FEE / SECURITY DEPOSIT

1. A **\$30.00 non-refundable application fee per adult applicant** must be paid with the signed Application before it will be submitted for consideration.
EXACT CASH ONLY
2. If Applicant(s) wishes to hold the residence prior to application approval, a Holding Fee in the amount of one-half (1/2) of the rental rate must be paid. This will guarantee the Applicant(s) the premises they desire to rent, when approval is granted and the Lease Agreement is signed. Otherwise, the premises will remain on the market.
3. Once the Application is approved, if a property is held by the payment of 1/2 the rental amount, the Applicant **has three (3) working days** to sign the Lease Agreement and forward all other necessary paperwork. If this is not accomplished, the property will be returned to the market and the Holding Fee will be forfeited.
4. At the time of the Lease Signing, the full amount of the Security Deposit must be paid.
5. If the **Application is not approved**, any Holding/Security Deposit paid will be fully refunded to the applicant(s).

UNIT BEING APPLIED FOR _____

SIGNATURE _____ DATE _____