

APARTMENT ADMISSION GUIDELINES

The following criteria must be met by all applicants before they will be approved for occupancy of an Apartment:

I. IDENTIFICATION

1. Applicants must provide current state or federally issued photo identifications prior to approval; however, **a copy of the photo will not be a part of the application**, rather only information from the identification such as name, address and the license number, will be used.

II. INCOME GUIDELINES

1. Applicants must provide evidence that monthly income will be equal to or greater than **3** times the monthly rent (“Income Criteria”).
 - A. All of the following must be verified: Length of employment; salary; income from divorce, interest, and other permanent income. To verify salary, Applicants must provide pay stubs for the thirty (30) days immediately preceding the date of Application.
 - B. Gifts (income) from a parent or grandparent must be verified with cancelled checks or bank statements and must have been received for three (3) consecutive months prior to application;
 - C. Income from a parent or grandparent should not exceed \$500 per month in calculation of Gross Income.
2. Applicants who are self-employed must provide copies of its/theirs prior one (1) year’s tax returns.

III. ADDITIONAL INCOME

1. Additional Income may be considered when determining whether an Applicant meets the Income Criteria. Additional Income should be no more than twenty-five (25%) percent of total income; however, for Senior citizens over the age of 55, Additional Income can be greater than twenty-five (25%) percent of the total income.
2. To determine Additional Income, the total sum of all savings, certificates of deposits, money market balances, and all other forms of investments can be considered and submitted for review.
3. The Income Criteria will be met if the Applicant’s monthly income when added to Additional Income is equal to or greater than three (3) times the total amount of rent for a 12-month Lease Term; i.e., if the monthly rent is \$600.00 and the term is one (1) year and required income is \$1,800, Applicant’s Monthly Income is \$1,400, but the Applicant’s Additional Income is over \$1,400, the Applicant will qualify.

IV. ROOMMATES

1. Each roommate **must** meet the credit and criminal criteria individually and must be a party to the Lease agreement. Roommates will meet the Income Criteria if the roommates combined income is **3** times the monthly rent and all other income guidelines are followed as outlined above.
2. All young adults 18 years or older, living with parents or family on premises:
 - A. Must sign the lease.
 - B. Must meet the Credit Criteria and Criminal Criteria above.
3. Each roommate must meet the Credit Criteria and Criminal Criteria herein.

V. STUDENTS

1. Full time students that have **no** income may be approved with a parent as a co-signer; provided, however, the parent must meet all of the requirements herein.
2. An alternate family member may be considered if approved by the property manager.

Resident Criminal History Records Consent Form

Addendum to Application

Property Name: _____

Apartment Number: _____

The undersigned Applicant (Applicants) hereby authorizes ([Villages of Williamsburg](#)) Apartments to directly, or through a third party service provider, to investigate Applicant's criminal history record and to review any information pertaining to applicant which may be maintained by a federal or local law enforcement agency. Such information shall include:

- Any terrorism related convictions,
- Any drug related convictions, including petty offenses,
- Any prostitution related convictions,
- Any sex related convictions,
- Any cruelty to animals related convictions,
- Any person or property misdemeanor convictions,
- Any of the above related charges resulting in "Adjudication Withheld" and/or "Deferred Adjudication",
- Active status on probation or parole resulting from any of the above, and

Applicant will be required to pay a total charge of **\$50 for the first applicant and \$15 for each additional applicant** for the credit and criminal review.

Furthermore, in the event it becomes necessary to request specifics regarding "existing out-of-state records" referenced in any file maintained by a local law enforcement agency, Applicant will be required to pay an additional charge of **\$10 per state per applicant** per state to obtain out-of-state records. Applicant understands that delivery of out-of-state records information can take up to seven days from the date of request.

The information is required to obtain criminal history records and must be completed by all applicants 18 years of age or older. This information is necessary to clearly identify the correct criminal history record and avoid mistaken identity when there are multiple matches for a given name. We request this information for the sole purpose of facilitating the investigation of Applicant's criminal history. "Certain information provided herein by Applicant, will not be considered or used in determining whether Applicant will be accepted as resident.

Have you or any occupant listed ever been convicted of a felony?

___ Yes ___ No

Have you or any occupant listed ever been convicted of a felony, received a deferred adjudication for a felony or been arrested for a felony, which has not been finally adjudicated?

___ Yes ___ No

Have you or any occupants listed ever been convicted for sexual misconduct?

___ Yes ___ No

Have you or any occupant listed ever been convicted of sexual misconduct, received deferred adjudication for sexual misconduct or been arrested for sexual misconduct which has not been finally adjudicated?

___ Yes ___ No

Applicant may be allowed to begin residency based upon Applicant's representations in application. However, should said representations be incorrect, Applicant's lease will be immediately terminated. _____ **Initial**

It is understood and agreed that the Owner is not responsible under any circumstances for conducting a search or of obtaining any information regarding the criminal behavior by or arrests or convictions of any Resident, occupant or guest in the premises or the complex of which the premises are a part. If Owner does conduct a search or obtain such information, it shall not be responsible for the scope or accuracy of such search or for any misuse or non-use of the results of such search or such information.

Applicant's Signature

Date

Applicant's Signature

Date

APPLICANT / (Co-Signer) CONSENT

Please have all applicants and co-signers complete and sign form.

I hereby consent to allow ([Villages of Williamsburg Apartments](#)), through its designated agent and its employees, to obtain and verify my credit information for the purpose of obtaining my credit score, which is based on real data and statistics, the credit information will include items such as my bill payment history, outstanding judgments, repossessions, the number and type of accounts that I have, late payments, collection items, bankruptcies, outstanding debt, and the age of my accounts. I understand that through a statistical program, the Lessor compares this information to the credit trends of other consumers to predict how likely it is that I will pay my rent in a timely manner and fulfill my lease obligations. I understand that should my application be accepted and I lease an apartment, ([Villages of Williamsburg Apartments](#)), and its agent shall have the continuing right to review my credit information, rental application, payment history and occupancy history for account review purposes and for improving application review methods.

Applicant (or Co-Signer) name

Date

Signature

APARTMENT RENTAL APPLICATION

____ New ____ Roommate ____ Transfer

Date Received: _____ Time Received: _____

Apartment #: _____ Who referred you? _____

NAME: Mr./Mrs./Miss _____

Present Address: _____ City/ State/Zip _____

Telephone Number: _____ Date of Birth: _____ S.S.#: _____

LIST PERSONS WHO WILL OCCUPY THE APARTMENT

Name: _____ Relationship: _____ D.O.B.: _____ Sex: M / F S.S.# _____

Name: _____ Relationship: _____ D.O.B.: _____ Sex: M / F S.S.# _____

Name: _____ Relationship: _____ D.O.B.: _____ Sex: M / F S.S.# _____

Name: _____ Relationship: _____ D.O.B.: _____ Sex: M / F S.S.# _____

PRESENT LANDLORD/MORTGAGE COMPANY:

Name and Address: _____

How long there?: _____ Monthly Payment?: _____ Phone Number : _____

Why are you leaving?: _____

PREVIOUS LANDLORD: _____ Address: _____

PRESENT EMPLOYER: _____ Address: _____

Position: _____ Nature of Business: _____ How long?: _____

Income: _____ Hr. / Mo. / Yr Phone Number: _____

PREVIOUS EMPLOYER: _____ Address: _____

SPOUSE'S EMPLOYER: _____ Address: _____

Position: _____ Nature of Business: _____ How long?: _____

Income: _____ Hr. / Mo. / Yr. Phone Number: _____

Other Income: Source: _____ Amount : \$ _____

BANK ACCOUNTS: Name: _____ Checking Savings Amount : \$ _____

Name: _____ Checking Savings Amount : \$ _____

CREDIT REFERENCES

	Amount Owning	Monthly Payment
1. _____	\$ _____	_____
2. _____	\$ _____	_____

How many vehicles would you keep at this address? (Include company cars, boats, campers, etc.) **IF** permitted

- 1. _____ Year: _____ Tag # _____ State: _____
- 2. _____ Year: _____ Tag # _____ State: _____
- 3. _____ Year: _____ Tag # _____ State: _____

HAVE YOU OR YOUR SPOUSE EVER BROKEN A LEASE OR BEEN EVICTED FROM AN APARTMENT?

Yes No If yes, please explain: _____

HAVE YOU OR YOUR SPOUSE EVER BEEN SUED FOR NON-PAYMENT OF RENT OR DAMAGES TO PROPERTY? Yes No

If yes, please explain: _____

Desired date of occupancy? _____ Lease term preferred? _____

Do you have any pets? Yes No If so, what kind? _____ Weight: _____

Does your pet have a current rabies vaccination? _____ When? _____

In case of emergency, please contact: _____ How related?: _____

Address: _____ Phone No.: _____

The above information is correct to the best of my knowledge. It is understood that the above information will be held strictly confidential. I authorize management to verify the information provided in this application by making the following inquiries: 1) Verification of wages and/or salary, 2) Verification of current and previous places of residence, including payment history, 3) A current credit inquiry through the Credit Bureau and/or other references listed on application. I understand that if the information received from the above listed inquiries do not fall within the guidelines of the admission standards, as established by management that my application may be denied. 4) Criminal background check.

Applicant has deposited herewith the sum of \$_____, the receipt of which is hereby acknowledged. This application is made with the understanding that it is subject to acceptance by the Lessor. The applicant agrees that he/she shall not have any right to occupy any of the premises of the Lessor until execution by the Applicant and by the Lessor of a written lease of a particular apartment to be leased. The applicant agrees that the aforementioned deposit is not a rental payment and will not be applied towards any rental payment.

The applicant further agrees that in the event the application is approved (the approval and the time thereof being in the sole discretion of the Lessor) and the applicant fails or refuses to enter into the contemplated lease within 24 hours of the approval of the application, applicant will forfeit deposit as liquidated damages. Applicant will take possession of the apartment by the desired date of occupancy or will forfeit all deposits paid to hold the apartment.

In the event that the application is not approved or the lease is not executed for any reason for which the Lessor is responsible, said deposit will be refunded to the Applicant.

Signature of Applicant(s): _____ Signature of Manager: _____

- Please be aware that some large moving trucks may not be permitted to pass through property gates.

Villages Of Williamsburg Apartments

REQUEST FOR EMPLOYMENT VERIFICATION

To: _____

Date: _____

Submitted By: _____

Phone: _____

The person named below has made an application for an apartment with us. Your firm was listed as having currently or formerly employed this person. The applicant, by his/her signature below, has authorized you to release employment information. Thank you for your cooperation. Please call if you have any questions.

Employee Name: _____

Current Address: _____

Social Security #: _____

Location of Employment: _____

Applicant's Authorization of this inquiry

I hereby consent to the release of my employment information.

Employees Signature

Date Signed

Employer's Comments

Employed from: _____ To: _____ Positions Held: _____

Gross Salary or wages \$ _____ per Hour Week Month

If on hourly wage, please specify approximate number of hours worked weekly _____

Other Comments: _____

Signature

Title

Date