

VILLAS OF FOREST SPRINGS APARTMENT HOME APPLICATION

Date: _____

All fields in YELLOW to be completed by
Villas Leasing office.

Apartment Needed: 1BR 2BR

Desired Floor: 1st Floor 2nd Floor

Apt. # _____ Move-In Date _____

Move-In Date: _____ Flexible: Y N

Monthly Rent _____ Lease Dates _____

Total # of Occupants: _____

Concessions _____

EMAIL _____

HOME PHONE _____ ALTERNATE NUMBER _____

APPLICANTS NAME: _____ DATE OF BIRTH _____ SS# _____ - _____ - _____

CO-APPLICANTS NAME: _____ DATE OF BIRTH _____ SS# _____ - _____ - _____

OTHER OCCUPANTS:

NAME	D.O.B.	RELATIONSHIP	NAME	D.O.B.	RELATIONSHIP
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NAME	D.O.B.	RELATIONSHIP	NAME	D.O.B.	RELATIONSHIP
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PRESENT ADDRESS _____
STREET# STREET NAME APT. # CITY STATE ZIP

DATES: FROM _____ TO _____
LANDLORD NAME LANDLORD PHONE #

MONTHLY PYMT _____ REASON FOR MOVING _____

PREVIOUS ADDRESS _____
STREET# STREET NAME CITY STATE ZIP

PREVIOUS LANDLORD _____ PHONE NUMBER _____

APPLICANT'S EMPLOYER _____ POSITION _____

BUSINESS ADDRESS _____ PHONE # _____

SUPERVISOR'S NAME _____ EMPLOYED SINCE _____

PREVIOUS EMPLOYER _____ PHONE # _____

CO-APPLICANT'S EMPLOYER _____ POSITION _____

BUSINESS ADDRESS _____ PHONE# _____

SUPERVISOR'S NAME _____ EMPLOYED SINCE _____

PREVIOUS EMPLOYER _____ PHONE# _____

YOUR ANNUAL SALARY \$ _____
CO-APPLICANT'S ANNUAL SALARY \$ _____
OTHER INCOME _____

SOURCE _____

Have You Ever Been Convicted Of A Felony ? Yes _____ No _____ What Date ? _____
Have You Ever Filed For Bankruptcy ? Yes _____ No _____ What Date _____
Have You Ever Been Evicted ? Yes _____ No _____

VEHICLE _____ PLATE# _____
VEHICLE _____ PLATE# _____

DO YOU HAVE A PET? _____ IF SO WHAT KIND _____

AGE _____ WEIGHT _____ COLOR _____ NAME _____

EMERGENCY CONTACT:

NAME _____ ADDRESS _____ PHONE# _____

RELATIONSHIP _____ ALTERNATE # _____

APPLICANT HAS SUBMITTED THE SUM OF \$ _____ WHICH IS A **NON-REFUNDABLE PAYMENT FOR A CREDIT CHECK AND PROCESSING CHARGE OF THIS APPLICATION**. SUCH SUM IS NOT A RENTAL PAYMENT OR SECURITY DEPOSIT. THIS AMOUNT WILL BE RETAINED BY MANAGEMENT TO COVER PROCESSING APPLICATION FURNISHED BY THE APPLICANT.

DEPOSIT

THE UNDERSIGNED WARRANTS AND REPRESENTS THE INFORMATION ON THIS RENTAL APPLICATION TO BE TRUE AND CORRECT. ALL PERSONS/OR FIRMS NAMED MAY FREELY GIVE ANY REQUESTED INFORMATION CONCERNING ME AND I HEREBY WAIVE ALL RIGHT OF ACTION FOR ANY CONSEQUENCE RESULTING FROM SUCH INFORMATION.

I HEREBY DEPOSIT \$ _____ WITH MANAGEMENT AS A GOOD FAITH DEPOSIT IN CONNECTION WITH THIS APPLICATION FOR RESIDENCY. IF MY APPLICATION IS ACCEPTED I UNDERSTAND THIS AMOUNT WILL BE APPLIED TOWARD PAYMENT OF MY SECURITY DEPOSIT OF \$ _____. IF FOR ANY REASON, MANAGEMENT DECIDES TO DECLINE MY APPLICATION, THE MANAGEMENT WILL REFUND \$ _____ OF MY DEPOSIT AND THAT \$ _____ WILL BE NON REFUNDABLE AFTER 48 HRS. FROM DATE OF THIS APPLICATION.

I HERBY AUTHORIZE THE RELEASE OF ALL CREDIT INFORMATION INCLUDING, BUT NOT LIMITED TO VERIFICATION OF MY EMPLOYMENT AND INCOME, AS WELL AS CREDIT REPORTS, TO YOU OR ANY OF YOUR AGENTS

THE LEASE WILL NOT BECOME EFFECTIVE UNTIL APPLICATION IS APPROVED BY MANAGEMENT.

APPLICANT SIGNATURE _____ DATE _____

CO-APPLICANT SIGNATURE _____ DATE _____

FOR OFFICE USE ONLY

COMMENTS

MANAGER APPROVAL _____ DATE _____

MANAGER DENIAL _____ DATE _____

REASON _____

***VILLAS OF FOREST SPRINGS
3600 Spring Villa Circle
Louisville, KY. 40245
(502) 241-4190***

AUTHORIZATION

By signing this Authorization Form I am authorizing Villas of Forest Springs to obtain one or more “consumer reports” as defined in the Fair Credit Reporting Act, 15 U.S.C., Section 1681a (d) to seek information in reference to your credit worthiness, credit standing, credit capacity, employment verification, character, general reputation, personal characteristics, criminal background records and mode of living.

Resident Signature

Date

Resident Signature

Date

Agent for Owner

Date

Qualifying Criteria for The Villas of Forest Springs

The Villas of Forest Springs, its owners, and employees believe in equal housing opportunity for all without regard to race, sex, national origin, religion, disability, or familial status.

Acceptable Applicant

A. Employment/Income Verification

We verify your employment, name of employer, length of time on the job, and current position and salary at the time of application. If you are self employed or retired, you must submit two years tax returns to verify income. Apartment rent cannot exceed 33% of your gross income.

B. Credit Guidelines

1. Credit scores 625 or above are approved with normal deposit.
2. Credit scores 550-624 are approved with an extra deposit in the amount of \$400 and/ or with a cosigner**.
3. Credit Scores below 549 will be denied.

C. Criminal History

If you are bringing an application back to our office to be processed, bring your identification (driver's license or picture I.D.) for all persons over the age of 18 years. **FELONY CONVICTIONS OR MISDEMEANORS WHICH INVOLVE MORAL TURPITUDE (i.e. drug involvement, selling, manufacturing, or possession of a controlled substance, prostitution, theft, etc) DEFERRED ADJUDICATION FOR ANY SUCH OFFENSE, OR PROBATION FOR A FELONY ARE CONSIDERED REASONS FOR DENIAL.**

D. Rental History

1. Each prospect must have at least one year of acceptable rental/mortgage history that can be verified.
2. If you have just moved out of a parent's home, job stability, income, and credit must be in good standing. In some cases a co-signer or extra deposit may be required.

** Cosigner must meet all qualifying criteria and credit score must exceed 700.

I/We have read and understand the above and qualifying standards for my application to be approved.

Applicant(s) _____

Applicant(s) _____

Agent for Owner _____