



STATEMENT OF RENTAL POLICY FOR RESIDENTIAL MANAGEMENT

Welcome to Daejan Hidden Palms and Daejan Greenwich Commons Apartment Homes. Thank you for choosing our community. We require that each Applicant and adult occupant meet certain rental criteria. Before you fill out our Rental Application, we suggest that you determine whether you meet our requirements. Please note that the term “Applicant” provided below applies to all Residents to be identified on the Lease Contract and the person or persons to be responsible for paying the rent. Please note that these represent our current rental criteria; nothing contained in these requirements shall constitute a guarantee or representation by Owner prior to these requirements going into effect. Additionally, our liability to verify whether these requirements have been met is limited to the information we receive from the various credit reporting services used.

APPLICATION SCREENING CRITERIA

All applicants must have a Social Security Number and will be approved on the following basis:

1. Applicant or applicants must be a minimum of eighteen (18) years of age or older. Minors under the age of eighteen (18) are not required to apply but **MUST** be listed under Occupants.
2. Occupancy Guidelines:

<u>TYPE OF APARTMENT</u>	<u>MAXIMUM # OF OCCUPANTS</u>
ONE BEDROOM	2
TWO BEDROOM	4

3. A **non-refundable** application fee of **\$50.00** is required per person, for processing. ***If the application is approved, a security deposit of \$500.00 or a Sure Deposit of \$89.00 and a Non-refundable administrative fee of \$150.00 would be due to secure your new home. 1st month’s rent is due upon move in (if move in is after the 25th of the month the following months rent will also be due).*** These deposits are payable by a certified check or money order only. This will hold the apartment for up to thirty (30) days. Additionally, this **deposit/administrative fee are non-refundable** if Applicant(s) does not take the apartment. X_____ initial required to show you have read and understood this policy.
4. Employment Requirement
Employment will be verified. Verifiable income shall include income as confirmed by employer, trust officer, two (2) recent computerized pay stubs or two (2) years tax returns if self-employed



5. Income Requirements

Verifiable Income must cover the monthly rent plus any monthly fixed obligations. If Applicants do not meet this guideline, Owner may look at other compensating factors (i.e. Credit History, Length of Employment or Rental History) in the approval process.

6. Credit History

Your credit report must reflect a Scorex of 375 or above for approval. **(This score is not the common 100-900 score given on credit reports.)** A Scorex of 325 to 374 will be approved only with an additional deposit (amount dependent upon Scorex) or qualified co-signer/guarantor which meets all the same criteria of the application conditions. In addition, all outstanding public records or claims must be cleared. The Landlord reserves the right to deny your application if the above criteria is not met.

7. Verifiable Rental History

It is your responsibility to provide the necessary information that allows us to contact your past Landlords. You must have a history of paying your rent on time, no prior evictions, no history of default in lease obligations and have given proper notice and must not owe any money to your Landlord. If we are unable to verify your previous Landlords and/or references we reserve the right to deny your application.

8. Cosigners/Guarantor

If Applicant(s) is denied due to lack of income or credit history, Owner may allow applicant(s) to obtain a Cosigner. Cosigner must meet all the same criteria as stated in this application. No Cosigner will be accepted for an applicant(s) with bad credit history. Only one Cosigner allowed per application.

9. Criminal History

There must be no criminal records found or application will be denied.

You will be denied if:

If you misrepresent any information on the application you will be denied. In general, if misrepresentations are found after the rental agreement is signed, your rental agreement will be terminated.



Rental Agreement

If you are accepted, you will be required to sign a Lease Contract in which you will agree to abide by the policies of this rental property. A copy of this contract is available for your review. Please read the Lease Contract carefully, as we take each and every part very seriously. It has been written to protect the rights of both our residents and the Owners of the community.

ALL ITEMS LISTED ON APPLICATION SUBJECT TO CHANGE WITHOUT WRITTEN NOTICE



RENTAL APPLICATION FORM

Applicant #1

OCCUPANCY DATE: _____ **APARTMENT TYPE:** _____ **# OF APPLICANTS:** _____

FIRST NAME: _____ **MIDDLE INITIAL:** _____ **LAST NAME:** _____

DATE OF BIRTH: _____ **SOCIAL SECURITY #:** _____

EMAIL ADDRESS: _____

ARE YOU A CITIZEN OF THE UNITED STATES? _____ **YES** _____ **NO** _____

PRESENT ADDRESS

STREET ADDRESS: _____ **APARTMENT #** _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

NUMBER OF YEARS LIVED AT PRESENT ADDRESS: _____

PHONE NUMBERS

WORK: _____ **HOME:** _____ **CELL:** _____

CURRENT LANDLORD (IF YOU CURRENTLY RENT YOUR HOME)

LANDLORD NAME: _____ **PHONE:** _____ **CURRENT RENT PAID:** _____

SALARY

WK \$ _____ **MO \$** _____ **YR\$** _____ **ADDT'L INCOME: \$** _____

LENGTH OF EMPLOYMENT: _____

PRESENT EMPLOYER

EMPLOYER NAME: _____ **TITLE/POSITION:** _____

EMPLOYER ADDRESS: _____ **SUITE #:** _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____



PREVIOUS EMPLOYER (IF LESS THAN TWO YEARS)

EMPLOYER NAME: _____ **TITLE/POSITION:** _____
EMPLOYER ADDRESS: _____ **SUITE #:** _____
CITY: _____ **STATE:** _____ **ZIP CODE:** _____

PLEASE INDICATE HOW YOU HEARD ABOUT HIDDEN PALMS APARTMENTS (CIRCLE ONE)

STAR LEDGER **SIGN/DRIVEBY** **INTERNET REFERRAL** **4 WALLS** **RENT.COM**
APARTMENT GUIDE **APARTMENTS.COM** **PRESENT TENANT** **FOR RENT** **OTHER**

MONTHLY PAYMENTS

CREDIT CARDS MONTHLY PAYMENTS BALANCE: \$ _____ \$ _____ \$ _____ \$ _____

CAR PAYMENT: \$ _____ **NUMBER OF CARS (INCLUDING COMPANY VEHICLES):** _____

MAKE: _____ **YEAR:** _____ **PLATE:** _____

MAKE: _____ **YEAR:** _____ **PLATE:** _____

DRIVER'S LICENSE NUMBER: _____ **STATE:** _____

TOTAL NUMBER OF OCCUPANTS IN THE APARTMENT: _____

PLEASE ENTER ALL OCCUPANTS UNDER THE AGE OF 18 BELOW. ANY OCCUPANTS 18 YEARS OR OLDER MUST FILL OUT AN APPLICATION.

NAME	RELATIONSHIP	BIRTHDAY	SOCIAL SECURITY #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PET INFORMATION: WILL A PET BE MOVING IN? YES OR NO

PET NAME	CAT OR DOG	BREED	AGE	COLOR
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

EMERGENCY CONTACT PERSON

FIRST NAME: _____ **LAST NAME:** _____ **PHONE #:** _____



RESIDENTIAL MANAGEMENT, AS OWNER, RESERVES THE RIGHT TO REJECT THIS APPLICATION AND TO REFUSE POSSESSION OF THE ABOVE MENTIONED ACCOMODATIONS. I HAVE READ THE FOREGOING AND CERTIFY THAT THE INFORMATION SUBMITTED BY ME IS TRUE AND CORRECT AND THAT THIS APPLICATION IS ON MY BEHALF. SUBJECT TO THE ABOVE, APPLICANT AUTHORIZES RESIDENTIAL MANAGEMENT, OR ITS AGENT, TO PROCESS THIS APPLICATION AND MAKE THE NECESSARY SEARCHES AND INVESTIGATIONS. THE APPLICATION FEE IS NON-REFUNDABLE.

APPLICANT

DATE

I hereby confirm that I have none of the following:

Please Initial each that you do not possess:

Criminal Record _____

Bankruptcy _____

Court/Tenant-Landlord Filings _____

Civil Judgments _____

Sex Offender Record _____



Applicant #2

OCCUPANCY DATE: _____ APARTMENT TYPE: _____ # OF APPLICANTS: _____

FIRST NAME: _____ MIDDLE INITIAL: _____ LAST NAME: _____

DATE OF BIRTH: _____ SOCIAL SECURITY #: _____

EMAIL ADDRESS: _____

ARE YOU A CITIZEN OF THE UNITED STATES? _____ YES _____ NO _____

PRESENT ADDRESS _____

STREET ADDRESS: _____ APARTMENT # _____

CITY: _____ STATE: _____ ZIP CODE: _____

NUMBER OF YEARS LIVED AT PRESENT ADDRESS: _____

PHONE NUMBERS

WORK: _____ HOME: _____ CELL: _____

CURRENT LANDLORD (IF YOU CURRENTLY RENT YOUR HOME)

LANDLORD NAME: _____ PHONE: _____ CURRENT RENT PAID: _____

PRESENT EMPLOYER

EMPLOYER NAME: _____ TITLE/POSITION: _____

EMPLOYER ADDRESS: _____ SUITE #: _____

CITY: _____ STATE: _____ ZIP CODE: _____

SALARY

WK \$ _____ MO \$ _____ YR\$ _____ ADDT'L INCOME: \$ _____

LENGTH OF EMPLOYMENT: _____



PREVIOUS EMPLOYER (IF LESS THAN TWO YEARS)

EMPLOYER NAME: _____ **TITLE/POSITION:** _____
EMPLOYER ADDRESS: _____ **SUITE #:** _____
CITY: _____ **STATE:** _____ **ZIP CODE:** _____

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APPLICANT

DATE

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Bankruptcy _____

Court/Tenant-Landlord Filings _____

Civil Judgments _____

Sex Offender Record _____



FAIR HOUSING STATEMENT

IT IS THE POLICY OF RESIDENTIAL MANAGEMENT AND THIS RENTAL COMMUNITY TO TREAT ALL CURRENT AND PROSPECTIVE RESIDENTS IN A FAIR, PROFESSIONAL MANNER, WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, FAMILIAL STATUS, HANDICAP OR NATIONAL ORIGIN.

“THIS IS AN EQUAL HOUSING OPPORTUNITY COMMUNITY”

I HAVE READ AND UNDERSTAND THE RENTAL POLICY OF THIS COMMUNITY.

APPLICANT SIGNATURE

DATE

APPLICANT SIGNATURE

DATE



LANDLORD VERIFICATION

I hereby authorize the landlord indicated below to release all information regarding my tenancy.

Applicant Name: _____
 Landlord Name: _____
 Address: _____

 Phone#: _____
 Fax#: _____
 Applicant Signature: _____

TO WHOM IT MAY CONCERN:

The above named applicant/resident is applying for an apartment within our community. We ask your cooperation in providing the following information and any other information concerning the applicant/resident which you feel may be of interest to a landlord. Your reply will be treated confidentially.

Thank you in advance for your response to our request.

Management Representative

Move in date: _____ Lease expiration? _____ Monthly rental amount? _____

How many late payments? _____ & Returned checks? _____ Deposit amount? _____

Did you receive proper notice? _____ How many occupants? _____ Any Pets? _____

Did the applicant break their lease? _____ If yes, why? _____

Did the applicant leave the apartment in good condition? _____

Does the applicant owe any balances? _____

Would you consider applicant's relationship with the landlord?
 Excellent Good Fair Poor

Any additional comments? _____

Signature of Landlord: _____ Date: _____
 Print Name: _____ Position: _____

PLEASE FAX TO: (813) 978-0631 Thank you!