

RENTAL APPLICATION

COMMUNITY NAME:		OFFICE USE:	
APARTMENT NUMBER:			
MONTHLY RENT:			
MOVE-IN DATE:			
DATE RECEIVED:		DATE:	
PLEASE PRINT			
FULL LEGAL NAME:			
SOCIAL SECURITY #		DRIVER'S LICENSE #	DATE OF BIRTH
DO YOU HAVE ANY PETS? IF SO, WHAT KIND?			
CO-APPLICANT NAME:			
SOCIAL SECURITY #		DRIVER'S LICENSE #	DATE OF BIRTH
NAMES OF OTHER PERSONS WHO WILL OCCUPY APARTMENT OTHER THAN YOURSELF: (PLEASE ALSO INCLUDE MINOR OCCUPANTS NAMES AND AGES, IF APPLICABLE)			
NAME:		AGE:	
NAME:		AGE:	
NAME:		AGE:	
CURRENT ADDRESS:		(City)	(State)
		(Zip Code)	
HOME PHONE #:		HOW LONG AT THIS ADDRESS:	
LANDLORD NAME:		PHONE #:	
MONTHLY RENT PAID: \$			
IF AT PRESENT RESIDENCE LESS THAN ONE YEAR PLEASE PROVIDE THE FOLLOWING:			
PREVIOUS ADDRESS:		(City)	(State)
		(Zip Code)	
LANDLORD NAME:		PHONE #:	
MONTHLY RENT PAID: \$			
CURRENT EMPLOYMENT			
COMPANY NAME:			
ADDRESS:			
POSITION;		GROSS MONTHLY INCOME:	
PHONE #:		LENGTH OF EMPLOYMENT:	
SUPERVISOR'S NAME AND PHONE:			
OTHER INCOME:		SOURCE:	

IF AT PRESENT EMPLOYER LESS THAN 1 YEAR, PLEASE COMPLETE THE FOLLOWING:			
PREVIOUS EMPLOYER			
COMPANY NAME:			
ADDRESS:			
POSITION:		GROSS MONTHLY INCOME: \$	
PHONE #:		LENGTH OF EMPLOYMENT:	
CO-APPLICANT'S CURRENT EMPLOYMENT			
COMPANY NAME:			
ADDRESS:			
POSITION:		GROSS MONTHLY INCOME: \$	
PHONE #:		LENGTH OF EMPLOYMENT:	
IF AT PRESENT EMPLOYER LESS THAN 1 YEAR, PLEASE COMPLETE THE FOLLOWING:			
COMPANY NAME:			
ADDRESS:			
POSITION:		GROSS MONTHLY INCOME: \$	
PHONE #:		LENGTH OF EMPLOYMENT:	
CRIMINAL RECORD			
HAVE ANY OF THE INTENDED OCCUPANTS BEEN CONVICTED OF A CRIME? (CIRCLE ONE) YES NO IF YES , PLEASE EXPLAIN NATURE OF CRIME.			
DATE OF CONVICTION	FILE NUMBER	COUNTY	STATE
AUTOMOBILES			
YEAR	MAKE/MODEL	COLOR	LICENSE #
YEAR	MAKE/MODEL	COLOR	LICENSE #

EMERGENCY CONTACT		PHONE #:
NAME:		
ADDRESS:		
PLEASE PROVIDE THE FOLLOWING TO ASSIST US IN PROCESSING YOUR APPLICATION: (1) DRIVER'S LICENSE OR STATE I.D. CARD; (2) PROOF OF INCOME; (3) OTHER INFORMATION REQUESTED BY YOUR LEASING REPRESENTATIVE. I/WE AUTHORIZE YOU TO OBTAIN AN INVESTIGATIVE REPORT IN CONNECTION WITH THIS APPLICATION. I/WE ALSO UNDERSTAND THAT ANY FALSE, DECEPTIVE OR ABSENT INFORMATION WILL RESULT IN THE REJECTION OF THIS APPLICATION AND FORFEITURE OF DEPOSIT.		
SIGNATURE:		DATE:
CO-APPLICANT'S SIGNATURE:		DATE:

Applicant Screening Policy

All applicants shall submit individual applications with appropriate screening fees. A current driver's license or other valid state or federal issued photo identification along will be necessary in order to process your application. All applicants must be at least eighteen (18) years of age.

Credit & rental history requirements

- All accounts showing 60 days late or greater will be considered as derogatory and management reserves the right to deny any applicant(s), require an increase in security deposit or require a co-signer. Applicants with little or no credit are also subject the above.
- Applicants with a bankruptcy within the past two (2) years will be automatically denied.
- Applicants who have been evicted within the past 5 years and/or have a balance from an apartment community in collections will be automatically denied.

Criminal Background Requirements

- Applicants with a felony history may be denied. Any applicant with a history of the following crimes will automatically be denied. (1) Drug Possession with intent to sell, (2) Prostitution, (3) Burglary, (4) Theft, (5) Crimes against persons.

Minimum Income Requirements

- Gross household income must be a minimum of two and one-half (2.5) times the rent.

General Regulations & Restrictions

- Incomplete, inaccurate or falsified information will be grounds for denial of the application or subsequent termination of tenancy upon later discovery of information being falsified. Deposit monies will be forfeited for falsified or inaccurate information.
- Two (2) paycheck stubs will be required for each applicant or written proof of income in the form of last years tax return, court ordered funds, Government issued funds or banking documents.
- All persons over the age of Eighteen (18) must complete an application and must be listed on the Colorado Lease Agreement as a lessee.
- Applicants must have one (1) year of verifiable employment and rental history.
- Co-signers may be permitted (at the sole discretion of the manager) for applicants who do not meet the minimum credit or income requirements or who do not have 1 year of verifiable rental history. The Co-signer must complete a rental application, pay the required fee and have perfect credit and rental history.

Applicants have 48 hours from the date of the application to cancel and receive a refund of their holding deposit. Application fees are never refundable. After forty eight (48) hours holding deposit monies will only be refunded if the applicant is denied.

All applicants will be judged on the basis of the above screening criteria without regard to the applicant's race, color, religion, national origin, sex, familiar status or handicapped status.

Applicant's Signature

Date

Applicant's Signature

Date

Agent

Date



Liability Insurance Requirement *(please read carefully)*

We at Alliance Residential Company are pleased to welcome you to our community! While we are proud of our reputation for quality of life and safety, accidents happen, even when people are careful. And usually damage caused by a resident is the financial responsibility of that resident, not the property owner. These accidents -- such as bathtubs overflowing, kitchen fires or damage to the common areas -- can create significant financial hardship for apartment residents. That is why liability insurance coverage is *required* in our lease.

To fulfill your lease obligation you are required to obtain and maintain liability insurance when you sign a new lease or at lease renewal, for a **minimum coverage level of \$50,000**. Contents coverage is not required in your lease, but is available and recommended. *You may choose the insurance company and policy limits that are most appropriate for your situation, providing the minimum coverage level is satisfied.* If you arrange your own policy simply provide proof of this coverage via a copy of the Declarations Page, showing this community listed as an “additional insured” or “interested party”.

For the convenience of residents that do not have a specific insurance agent identified, we have arranged for a convenient, affordable insurance option for this community. First American Property & Casualty Insurance Company has made available Renters Advantage, a resident liability insurance program developed for multifamily residents. There is no application, no hassle, and your premium will be billed monthly with your Rent.

Please indicate your liability insurance election below.

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I have arranged for liability insurance coverage through _____, and have listed this community as an interested party on my policy. I understand that I must maintain liability coverage for the duration of my lease. I also agree to provide this leasing office with a copy of the Declarations Page showing evidence of insured status before I can move in.

If I have no other liability coverage at time of move in, I understand I will be enrolled in the Renters Advantage program, and agree to pay the applicable premium for this coverage.

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I wish to be enrolled in the Renters Advantage program for renters insurance:

Liability coverage only (\$50,000 limit, premium of \$13 / month)

Liability and contents coverage. (\$15,000 contents limit, for an additional cost of \$5 / month. Total premium of \$18 / month).

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I make no election at this time, but will be enrolled in the Renters Advantage program for liability coverage until I supply other coverage. I will pay the additional premium for this coverage.

Resident Signature Date Resident Signature Date

Resident Signature Date Resident Signature Date

