



APPLICATION FOR RESIDENCY

This application is to be returned to the **PROPERTY MANAGER**.

NOTE: Your credit history and landlord references will be verified.
No application will be approved without complete verifications.

Please be sure to completely and neatly fill in ALL blanks.

Answer all "Yes or No" questions.

Be sure to include the name, date of birth and social security number of all the people who will be living with you. All co-applicants over the age of 18 must complete their own application, unless husband and wife.

Attached to your application you will find a Policy Statement for acceptance to this apartment complex.

WE SUBSCRIBE TO ALL FEDERAL, STATE AND LOCAL FAIR-HOUSING LAWS.

RESIDENTS, OTHERS IN THEIR HOUSEHOLDS, AND PEOPLE UNDER THEIR CONTROL MUST NOT TAKE PART IN ILLEGAL DRUG ACTIVITY ON OR NEAR THEIR RENTAL AREA . . . OR THEY WILL FACE EVICTION.





POLICY STATEMENT

All applicants will be accepted or rejected for residency. No person(s) will be denied occupancy based on membership in any protected class, according to local, state and federal fair housing laws.

Regal Property Management maintains the following policies.

1. Applicants whose rent would exceed 40% of their monthly income may be required to obtain a co-signer. A co-signer, if required, must guarantee rental payments by signature, in person or in the presence of a notary, on the lease. Co-signer shall qualify by virtue of credit reference and record of timely payment of debts. In exceptional circumstances, such as no other debts, payments, credit record of prompt payment of all debts, and verification of monthly income for rent may be considered.
2. An applicant's credit report shall reflect a habit of prompt payment of debts and no unsatisfied judgments. A co-signer guarantor may be requested in the absence of required credit report.
3. A positive past housing reference will be required. If applicant has no prior rental history, a co-signer may be required. Past housing reference shall include:
 - A) Record of timely payment of rent;
 - B) Record of abiding by management rules;
 - C) Record of not disturbing other residents; and
 - D) Record of respect of property.
4. Background screening must not reveal any criminal activity that may be deemed a detriment to the safety and security of tenants.
5. All information on the application form must be completed; any falsification of information on the application shall be grounds for rejection.
6. No more than two (2) persons per bedroom shall occupy a unit. This policy shall be applied to ALL qualified applicants, regardless of their membership in any protected class.
7. Delinquent tenants will not be tolerated. Failure to pay rent and/or excessive damage to units or common areas is grounds for eviction. Eviction policies for failure to pay rent will be strictly enforced.
8. Manufacture, distribution or use of a controlled substance on premise may be grounds for lease termination or eviction.
9. No pets are allowed, with the exception to service animals as required by the Americans with Disabilities Act or in a select designated pet unit with a signed pet policy.



Application for Residency

Please Fill Out Completely and Neatly

Location: _____

Unit Type: APARTMENT

TOWNHOME

Move In Date: _____

This application is NOT a Rental Agreement, Contract or Lease. All applications are subject to management approval. No applicant will be judged on the basis of race, color, religion, sex, handicap, familial status, national origin, sexual orientation, marital status, legal source of income, age, or ancestry.

FULL NAMES OF PERSONS TO OCCUPY UNIT

DATE OF BIRTH

SOCIAL SECURITY NUMBER

1. _____	____/____/____	____-____-____
2. _____	____/____/____	____-____-____
3. _____	____/____/____	____-____-____
4. _____	____/____/____	____-____-____
5. _____	____/____/____	____-____-____

ADDRESS INFORMATION

Preferred Method of Contact

TEXT

EMAIL

PHONE

Email: _____ Home Number: (____) ____ - ____ Cell: (____) ____ - ____

Current Address: _____ City: _____ State: ____ Zip: _____

Current Landlord: _____ Phone: (____) ____ - ____ How long? _____ Rate: \$ ____/month

Previous Address: _____ City: _____ State: ____ Zip: _____

Previous Landlord: _____ Phone: (____) ____ - ____ How long? _____ Rate: \$ ____/month

INCOME AND EMPLOYMENT INFORMATION

Current Employer: _____ Phone: (____) ____ - ____ Supervisor: _____

Position: _____ Net Wages: \$ _____ per _____ # of Hours _____ Years? _____

Spouses Employer _____ Address _____

Position: _____ Net Wages: \$ _____ per _____ # of Hours _____ Years? _____

Income Source: _____ Address _____

Phone: (____) ____ - ____ How long will income be received? _____ Payment: _____/month

Have you ever been evicted? **YES NO** Have you ever willfully refused to pay rent when due? **YES NO**

EMERGENCY CONTACTS: Please List the Two Closest Relatives Living Nearest to You.

Name _____ Phone (____) _____ - _____

_____ Relationship _____
Address _____ City _____ State _____ Zip Code _____

Name _____ Phone (____) _____ - _____

_____ Relationship _____
Address _____ City _____ State _____ Zip Code _____

AUTOMOBILE INFORMATION

Auto: _____ Plate # _____ Driver's License Number _____
(Make, model, year)

Auto: _____ Plate # _____ Driver's License Number _____
(Make, model, year)

Personal References

Name _____ Phone (____) _____ - _____ Relationship _____

Name _____ Phone (____) _____ - _____ Relationship _____

Pet Information

Do you have a pet? (Circle) Yes No TYPE: Cat Dog Bird Other: _____ How Many: _____

If CAT please answer: Declawed YES NO Spayed/Neutered: YES NO Up-to-Date on shots: YES NO

If DOG please answer: Type: _____ Weight: ____ lbs. Spayed/Neutered: YES NO Up-to-Date on shots: YES NO

WE ARE REQUIRED TO NOTIFY YOU THAT AS PART OF OUR PROCEDURE FOR PROCESSING YOUR APPLICATION, WE MAY INVESTIGATE YOUR CREDIT HISTORY, EMPLOYMENT HISTORY AND GENERAL BACKGROUND. BY SIGNING BELOW, YOU HEREBY GRANT PERMISSION FOR US TO DO SO. IN ADDITION, SIGNING BELOW CERTIFIES THAT ALL OF THE ABOVE INFORMATION IS TRUE, CORRECT AND COMPLETE TO THE BEST OF YOUR KNOWLEDGE.

_____/____/2020
(Signature of Applicant) (Date)

_____/____/2020
(Signature of Applicant) (Date)

