

# APPLICATION FOR RESIDENCY

<b>Tell Us About Yourself (use additional sheets if necessary)</b>				
<b>PLEASE LIST YOUR FULL NAME AS IT APPEARS ON YOUR PHOTO ID</b>				
FIRST NAME		MIDDLE NAME		LAST NAME
SOCIAL SECURITY # OR INDIVIDUAL TAXPAYER ID		DRIVERS LICENSE OR OTHER GOVERNMENT ISSUED PHOTO ID #		TYPE OF ID
DATE OF BIRTH		OTHER NAMES USED IN LAST 10 YEARS		E-MAIL ADDRESS
PRESENT ADDRESS			COUNTY	WORK TELEPHONE #
CITY		STATE	ZIP	HOME TELEPHONE #
				MOBILE TELEPHONE #
<b>LIST ALL OTHER PERSONS, INCLUDING SPOUSES, TO OCCUPANCY THE PREMISES, INCLUDING DATE OF BIRTH (if 18 years or older, must fill out application as an applicant)</b>				
NAME	DATE OF BIRTH	NAME	DATE OF BIRTH	NAME
				DATE OF BIRTH
PRESENT ADDRESS IS (Check One): <input type="checkbox"/> OWNED HOME <input type="checkbox"/> RENTED HOME <input type="checkbox"/> RENTED APARTMENT <input type="checkbox"/> PARENTS' HOME <input type="checkbox"/> STUDENT HOUSING <input type="checkbox"/> OTHER:				
IF RENTING or OWNED: PRESENT LANDLORD / APARTMENT COMMUNITY / MORTGAGE COMPANY				
ADDRESS OF PRESENT LANDLORD / APARTMENT COMMUNITY / MORTGAGE COMPANY				
CITY		STATE	ZIP	TELEPHONE #
HOW LONG?		MONTHLY PAYMENT	ANTICIPATED MOVE-OUT DATE:	REASON FOR LEAVING:
PREVIOUS ADDRESS (IF LESS THAN THREE YEARS AT PRESENT ADDRESS)				
CITY		STATE	ZIP	TELEPHONE #
PREVIOUS ADDRESS IS (Check One): <input type="checkbox"/> OWNED HOME <input type="checkbox"/> RENTED HOME <input type="checkbox"/> RENTED APARTMENT <input type="checkbox"/> PARENTS' HOME <input type="checkbox"/> STUDENT HOUSING <input type="checkbox"/> OTHER:				
IF RENTING or OWNED: PREVIOUS LANDLORD / APARTMENT COMMUNITY / MORTGAGE COMPANY				
ADDRESS OF PREVIOUS LANDLORD / APARTMENT COMMUNITY / MORTGAGE COMPANY				COUNTY WHERE RESIDENCE LOCATED
CITY		STATE	ZIP	TELEPHONE #
HOW LONG?		MONTHLY PAYMENT	MOVE-OUT DATE:	REASON FOR LEAVING:
HAVE YOU LIVED IN A KONOVER RESIDENTIAL COMMUNITY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO			IF YES, WHICH ONE (include city and/or state)?	FROM: TO:
<b>Employment</b>				
EMPLOYER (COMPANY NAME)		HOW LONG?		MONTHLY GROSS INCOME
ADDRESS		CITY	STATE	ZIP
JOB TITLE		SUPERVISOR'S NAME		SUPERVISOR'S TELEPHONE #
OTHER SOURCES OF VERIFIABLE INCOME		WHEN RECEIVED	AMOUNT	MONTHLY INCOME FROM OTHER SOURCES
FORMER EMPLOYER (IF LESS THAN THREE YEARS AT CURRENT JOB)				HOW LONG?
ADDRESS		CITY	STATE	ZIP
JOB TITLE		SUPERVISOR'S NAME		SUPERVISOR'S TELEPHONE #
<b>Motor Vehicles (including cars, trucks, boats, motorcycles – if permitted at property):</b>				
MAKE/MODEL	YEAR	COLOR	LICENSE PLATE #	STATE
1.				
2.				
3.				
<b>Pets (animals require our consent):</b>				
1.	TYPE	BREED	WEIGHT	NAME
				LICENSE/TAG #
2.				
<b>Person to Notify in Case of Emergency, Death or Incapacity** (cannot be someone who intends to reside in the premises):</b>				
NAME	RELATIONSHIP	PRIMARY TELEPHONE #	ALTERNATE TELEPHONE #	
ADDRESS		CITY	STATE	ZIP
Will you or any of your occupants require special assistance in case of an emergency, including evacuation of the building or community? <input type="checkbox"/> YES <input type="checkbox"/> NO				
If so, identify the person and the type of special assistance required:				

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<b>Criminal Background Information</b>	
Do you or do any of your occupants have charges pending against you or against them for any criminal offense(s)?	Applicant: <input type="checkbox"/> YES <input type="checkbox"/> NO      Occupants: <input type="checkbox"/> YES <input type="checkbox"/> NO
Have you or have any of your occupants ever been convicted of, or pleaded guilty or no contest to, any criminal offense(s) or had any criminal offense(s) disposed of other than by acquittal or a finding of "not guilty"?	Applicant: <input type="checkbox"/> YES <input type="checkbox"/> NO      Occupants: <input type="checkbox"/> YES <input type="checkbox"/> NO
Any litigation, such as: evictions, suits, judgments, bankruptcies, foreclosures, etc.?	Applicant: <input type="checkbox"/> YES <input type="checkbox"/> NO      Occupants: <input type="checkbox"/> YES <input type="checkbox"/> NO
If "Yes" to any of the above questions, give details and dates, including the county and state in which the incident occurred:	
How did you hear about our community?	
<input type="checkbox"/> Internet (Which Site?) _____	<input type="checkbox"/> Resident (Name?) _____
<input type="checkbox"/> Drive-By <input type="checkbox"/> Rental Publication (Which One?) _____	<input type="checkbox"/> Rental Agency (Which One?) _____
<input type="checkbox"/> Locator Service (Which One?) _____	<input type="checkbox"/> Other _____
<b>Agency Disclosure (applicable for CT applicants only)</b>	
Konover Residential Corporation ("Manager"), and its leasing agents have been retained by the owner of the community in which your apartment is located as its representative for management and leasing services. Manager owes fiduciary duties such as loyalty and faithfulness to the owner. As our customer, we want you to understand that an agency relationship exists between Manager and the owner. Under applicable law, prompt disclosure in writing of agency relationships to all actual and prospective parties to a transaction at the earliest practical time is encouraged and/or required. Each party should carefully read all documents pertaining to any real estate transaction. Should you have any questions, please let us know and we will gladly answer them. By signing this application, each of the undersigned acknowledges that he or she has read and received a copy of this Agency Disclosure.	
It is unlawful to discriminate against an applicant or tenant because of their race, color, national origin, religion, gender, familial status, disability, or any other basis that may be protected under applicable state or local law.	
<b>PLEASE READ CAREFULLY AND SIGN BELOW</b>	
<b>Correct Information:</b> You represent that all of the above statements are true and complete. You authorize us to contact any references listed above and to obtain consumer reports, which may include credit, rental payment history and criminal background information about you and any occupants in the premises in order to verify the above information. You further authorize us to obtain subsequent consumer reports to ensure that you continue to satisfy the terms of your tenancy, for the collection and recovery of any financial obligations related to your tenancy, or for any other permissible purpose. You understand that we may report all positive and negative rental payment history to consumer reporting agencies who track this information for landlords, mortgage companies and other creditors. You and all occupants hereby release from all liability or responsibility all persons and corporations requesting or supplying such information. You acknowledge that false, incomplete or misleading information herein may constitute grounds for rejection of this application, termination of right of occupancy of all residents and occupants under a lease and/or forfeiture of deposits and fees, and may constitute a criminal offense under the laws of this State. This application is preliminary only and does not obligate us to execute a Lease or to deliver possession of the premises to you.	
I have read and agree to the provisions as stated.	Non-refundable Application Processing Fee Required with each Application: \$ _____
Applicant Signature: _____	Total Holding Deposit *** (Per Apartment, if any): \$ _____
Date: _____	Holding Deposit amount paid by this applicant: \$ _____
	Address of Apartment/Premises being held: _____
<b>OFFICE USE ONLY</b>	
Apartment Number _____	Apartment Size/Description _____
Anticipated Move-In Date _____	Lease Start Date _____
Lease End Date _____	Quoted Monthly Apartment Rent _____
	Property Staff Initials: _____

**\*\* Authorization for Providing Access in Event of Emergency, Death or Incapacity.** If your application is approved and you take possession of the apartment/premises, you authorize us, in the event of your death or incapacity, to grant access to the premises and the contents therein to the individual you named above. Once we grant access to such person, he/she may remove all personal property from the premises and dispose of it in accordance with the applicable law. You hereby release and discharge us from any liabilities, claims or damages arising out of or in connection with our granting such access to the person you named.

**\*\*\* Holding Deposit Agreement.** You understand that the holding deposit is not a security deposit. By signing this application and paying the holding deposit, you are requesting us to reserve the apartment/premises for you. You understand that the premises will not be taken off the market until such time as you have submitted this fully-completed and signed application, as well as all the necessary documentation we require in order to approve or deny your application. You further understand that the holding deposit does not obligate us to execute a lease or to deliver possession of the premises to you.

If your application is denied, we will refund the entire holding deposit to you. We may be required to deposit the holding deposit and issue a refund check to you.

If we notify you that your application has been approved and you notify us within 24 hours of that notification that you do not want to enter into a lease with us, we will refund the entire holding deposit to you. We may be required to deposit the holding deposit and issue a refund check to you.

If we notify you that your application has been approved and you do not notify us within 24 hours of that notification that you do not want to enter into a lease with us, your entire holding deposit will be forfeited. We both agree that your election to not enter into a lease with us, without providing the above mentioned notice within 24 hours of your approval notification, will cause us to incur costs that are difficult and impractical to fix. Such costs include, without limitation, lost rent on the premises, as well as marketing, advertising, office overhead and other costs incurred by us in preparing the premises for rental to other potential tenants. We both agree that the forfeiture of the holding deposit, in such instance, is not a penalty but represents a fair and reasonable estimate of the costs that we will incur as a result of your failure to timely enter into a lease for the premises.

If your application is approved and you enter into a lease with us, the holding deposit will be applied, at our discretion, to one of the following: (i) any security deposit required under the lease; (ii) any rental amount required under the lease; or (iii) any other fees and charges required under the lease. If there is inconsistency between the terms of this application and the signed lease, the terms of the lease will control.