

Rcvd:	
Paid: Yes/No	

1550 S. Gilbert Street Phone: (319) 887-2187 Iowa City, IA 52240 Fax: (319) 887-2109

#### APPLICATION FOR TENANCY

### A \$30.00 non-refundable CASH application fee is required for processing.

A separate application must be filled out by each applicant (except for married couples). <u>Fill in each blank completely</u> and sign where indicated. We collect as many applications as possible. We run credit check and call references on all applicants. We do not automatically rent to the first applicant; we do rent to the first applicant that best meets our criteria. <u>ANY FALSE INFORMATION</u> <u>PROVIDED MAY RESULT IN IMMEDIATE DISQUALIFICATION.</u>

Property	Desired:					DES	SIRED MOVE IN	N DATE		
			D	EDSONAL I	NFORMA	ΓΙΟΝ				
APPLICA	ANT NAME:				_BIRTH DA	ATE:	SS#: _			
DRIVER	S LICENSE	State Issued By	:	DL#:			_ Phone#:			
COAPPL	ICANT (ONLY	IF MARRIED):			_BIRTH D	ATE: _	SS#:		<del></del>	
DRIVER	S LICENSE	State Issued By	:	DL#:			_ Phone#:			
				RESIDENT	AL HISTO	)RV				
Present										
Present	Since:	(mm/yy) Re	nt/Month:							
Landlord	:	Ac	dress:		City:		State:	Zip:		
	Phone: rent up to date?	Yes No	— Have you	given notice?	Yes	No F	Have you been ask	ed to leave? Ye	s No	
Previous Address:			Ci	ty:			State:	Zip:		
Previous		To: _								
		Addre	SS:		City:		State:	Zip:		
	Phone:up to date?	Yes No Had y	ou given notic	ce? Yes	No Ha	d you b	een asked to leave	e? Yes No		
		• • • • • • • • • • • • • • • • • • • •		OCCI						• • • • •
Number t	o occupy unit:									
		NAME		KE	LATIONSH	IP	<u> </u>	BIRTH DATE		

PETS: Yes No If yes, give details (number, type, & size)

		VENIOLE					
		VEHICLE	2				
Model/ color #1:		State:		Licen	se Plate #1:		
Model/ color #2:		State:		Licen	se Plate #2:		
		EMPLOYMI	ENT				
EMPLOYER:				ddress: _			
What do you do there?		Supervisor:			Phone:		
PREVIOUS/COAPPLICANT E	EMPLOYER:		From:	To: _	Address:		
What did you do there?		Supervisor:			Phone:		
		DIGO E					
		INCOME	; 				
Current Income: \$	Weekly/Biv	veekly/Monthly/Year	ly Source:				
Current Income: \$	Weekly/Biwe	ekly/Monthly/Yearly	Source:				
Bank/Credit Union:		locati	on				_
		REFERENC	ES				
Relative		]	Non-Relative	;			
Reference:	Relation:		Reference:				
Address:							
Phone #:			Phone#:				_
Emergency		1	Non-Relative				
Contact:	Relation:						
Address:			Address:				_
Phone #:		1	Phone#:				
Phone #.			PHOHE#				
		CREDIT ACCO	UNTS				
Current (open) accounts including			• • • • • • • • • • • • • • • • • • • •				
CREDITORS NAME	PAYMENT	iouns.	IS P	AYMEI	NT CURRENT?		
				Yes	No		
				Yes	No		
				Yes	No		
				Yes	No		
			,,				
		vers on a separate she				***	<b>3.</b> T
Are you currently using or have	•		-	rolled si	ubstance?	Yes	No
Have you ever committed a crim		ou on the sex offender	page?			Yes	No
Has any signer ever been sued f						Yes	No
Has any signer ever been bankru						Yes	No
Has any signer ever broken a lea		, , 10				Yes	No
Has any signer been evicted, or		-	11 ' 1	2		Yes	No
Has any signer ever been arrested and/or charged with a felony or indictable misdemeanor?						Yes	No

What is a current email address for you?						
Is the total move-in amount (rent and deposit) available now?	Yes	No				
Acceptance of this application by the landlord shall not con must also sign a formal written rental agreement within 48 qualified applicant.						
SECURITY DEPOSITS ARE BASED ON A COMBINATI REFERENCES. ACCORDING TO IOWA TENANT LAN LANDLORD SHALL NOT DEMAND OR RECEIVED AS OF TWO MONTHS' RENT" RIVER CITY PROPERT M. ON ALL RENTALS EQUAL TO ONE MONTH'S RENT INCREASE THE SECURITY DEPOSIT UP TO TWO MO	NDLORD L. S A SECUR ANAGEMI BUT RESE	AW, SECTION 562A.12 OF THI ITY DEPOSIT AN AMOUNT O ENT COLLECTS A <u>MINIMUM</u> RVES THE RIGHT UNDER TH	E IOWA CODE, "A R VALUE IN EXCESS SECURITY DEPOSIT IE IOWA CODE TO			
Applicant authorizes the landlord to contact past and present landlords, employers, creditors, credit bureau, neighbors and any other sources deemed necessary to thoroughly investigate applicant. Applicant certifies that all the information is true, accurate, and complete to the best of applicant's knowledge. ANY PERSON OR FIRM IS AUTHORIZED TO RELEASE INFORMATION ABOUT THE UNDERSIGNED UPON PRESENTATION OF THIS FORM OR A PHOTOCOPY OF THIS FORM AT ANY TIME. WE RESERVE THE RIGHT TO REQUIRE A CO-SIGNER AND/OR DOUBLE DEPOSIT.						
XAPPLICANT SIGNATURE		DATE				
X		_				
COAPPLICANT SIGNATURE		DATE				

# **Application & Credit Guidelines**

CRIMINAL RECORD SCREENING POLICY UNACCEPTABLE OFFENSES/CRIMES				
Aggravated Assault	Forgery/Counterfeit			
Assault (Misdemeanor)	Homicide			
Arson	Larceny/Theft			
Auto Theft	Narcotics (Felony)			
Domestic Abuse	Narcotics (Misdemeanor)			
Criminal Sexual Conduct	Prostitution			
Disorderly Conduct (Misdemeanor or greater)	Rape			
Disturbing the Peace (Misdemeanor or greater)	Robbery/Burglary			
DUI or DWI – 4 or more convictions	Vandalism/Destruction of Property			
Felonies (All)	Weapons			

CREDIT RECORD SCREENING POLICY				
UNACCEPTABLE CREDIT MARKS				
Bankruptcy within the last 12 months.				
Collection Accounts/Judgments unless proof of payment can be provided. Total combined delinquent				
debt cannot exceed \$500. Medical accounts will be excluded from review.				
Combined Delinquent Accounts Past Due exceeding \$500.				
<b>Repossession</b> within the last 12 months.				
Prior Evictions/Unlawful Detainers/Eviction process started				
Credit score below 600				

### **INCOME QUALIFICATION**

The combined gross income for the household must be equal to or greater than 3 times the total monthly payment.

## RENTAL/ADDRESS HISTORY QUALIFICATION

Positive, established rental history at your current and/or previous residence and are eligible for re-rental, or positive rating on mortgage loan. Address omissions or errors are grounds for denial.

EMPLOYMENT QUALIFICATION					
Six months minimum employment with your current job or previous employment in a related field.					
X					
APPLICANT SIGNATURE	DATE				

**DATE** 

COAPPLICANT SIGNATURE