



APARTMENTS (THE PROPERTY)



RENTAL APPLICATION

DATE _____ AGENT _____

APPLICANT'S FULL NAME - FIRST _____ MIDDLE _____ LAST _____

DATE OF BIRTH _____ SOCIAL SECURITY # _____

HOME PHONE (_____) _____ WORK PHONE (_____) _____ CELL PHONE (_____) _____ EMAIL ADDRESS _____

CO-APPLICANT'S FULL NAME _____ DATE OF BIRTH _____ SOCIAL SECURITY # _____

HOME PHONE (_____) _____ WORK PHONE (_____) _____ CELL PHONE (_____) _____ EMAIL ADDRESS _____

OCCUPANT INFORMATION:

NAME _____ DATE OF BIRTH _____ SOCIAL SECURITY # _____ RELATIONSHIP _____

NAME _____ DATE OF BIRTH _____ SOCIAL SECURITY # _____ RELATIONSHIP _____

NAME _____ DATE OF BIRTH _____ SOCIAL SECURITY # _____ RELATIONSHIP _____

NAME _____ DATE OF BIRTH _____ SOCIAL SECURITY # _____ RELATIONSHIP _____

ALL OCCUPANTS MUST BE LISTED. ALL OCCUPANTS 18 YEARS OF AGE AND OVER MUST SIGN ALL APPLICATION AND LEASE DOCUMENTS.

RESIDENTIAL HISTORY

MUST PROVIDE THREE FULL YEARS OF RESIDENTIAL HISTORY FOR BOTH APPLICANT AND CO-APPLICANT. ADDITIONAL SPACE AVAILABLE ON PAGE 3 OF THIS APPLICATION.

PRESENT HOME ADDRESS _____ APT/SUITE # _____

CITY _____ STATE _____ ZIP CODE _____ DATES: FROM _____ TO _____ RENT OWN

NAME OF COMMUNITY/LANDLORD _____ PHONE (_____) _____

MONTHLY RENT/PAYMENT \$ _____ REASON FOR MOVING _____

PREVIOUS HOME ADDRESS _____ APT/SUITE # _____

CITY _____ STATE _____ ZIP CODE _____ DATES: FROM _____ TO _____ RENT OWN

NAME OF COMMUNITY/LANDLORD _____ PHONE (_____) _____

MONTHLY RENT/PAYMENT \$ _____ REASON FOR MOVING _____

PREVIOUS HOME ADDRESS _____ APT/SUITE # _____

CITY _____ STATE _____ ZIP CODE _____ DATES: FROM _____ TO _____ RENT OWN

NAME OF COMMUNITY/LANDLORD _____ PHONE (_____) _____

MONTHLY RENT/PAYMENT \$ _____ REASON FOR MOVING _____

EMPLOYMENT HISTORY

MUST PROVIDE TWO FULL YEARS OF EMPLOYMENT HISTORY. ADDITIONAL SPACE AVAILABLE ON PAGE 4 OF THIS APPLICATION.

APPLICANT

CURRENT EMPLOYER _____ DATES: FROM _____ TO _____ POSITION/TITLE _____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

SUPERVISOR/HUMAN RESOURCE NAME: _____ SUPERVISOR/HUMAN RESOURCE: PHONE (_____) _____ FAX (_____) _____

ANNUAL INCOME _____ TIP/BONUS/COMMISSION INCOME _____

PREVIOUS EMPLOYER _____ DATES: FROM _____ TO _____ POSITION/TITLE _____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

SUPERVISOR/HUMAN RESOURCE NAME: _____ SUPERVISOR/HUMAN RESOURCE: PHONE (_____) _____ FAX (_____) _____

ANNUAL INCOME _____ TIP/BONUS/COMMISSION INCOME _____

CO-APPLICANT

CURRENT EMPLOYER _____ DATES: FROM _____ TO _____ POSITION/TITLE _____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

SUPERVISOR/HUMAN RESOURCE NAME: _____ SUPERVISOR/HUMAN RESOURCE: PHONE (_____) _____ FAX (_____) _____
 ANNUAL INCOME _____ TIP/BONUS/COMMISSION INCOME _____
 PREVIOUS EMPLOYER _____ DATES: FROM _____ TO _____ POSITION/TITLE _____
 ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____
 SUPERVISOR/HUMAN RESOURCE NAME: _____ SUPERVISOR/HUMAN RESOURCE: PHONE (_____) _____ FAX (_____) _____
 ANNUAL INCOME _____ TIP/BONUS/COMMISSION INCOME _____

ADDITIONAL INCOME, ASSETS AND BANK DEPOSITS, etc.
 DOCUMENTATION MAY BE NEEDED-ADDITIONAL SPACE ON PAGE 4



APPLICANT:	SOURCE _____	AMOUNT _____	FREQUENCY _____
	SOURCE _____	AMOUNT _____	FREQUENCY _____
CO-APPLICANT:	SOURCE _____	AMOUNT _____	FREQUENCY _____
	SOURCE _____	AMOUNT _____	FREQUENCY _____

ADDITIONAL INFORMATION

HOW DID YOU HEAR ABOUT OUR COMMUNITY? PLEASE BE SPECIFIC. _____

IF A RESIDENT REFERRED YOU, THEIR NAME _____

WILL YOU BE HAVING A PET IN YOUR APARTMENT? YES NO
 What is the Pet Type _____, Breed _____, Weight _____, Color _____, Age _____, Name: _____

HAVE YOU EVER FILED FOR BANKRUPTCY YES NO

HAS A CIVIL JUDGEMENT BEEN ENTERED AGAINST YOU FOR A COLLECTION OF DEBT? YES NO

HAVE YOU EVER BEEN ARRESTED OR CONVICTED OF A CRIME? YES NO

HAVE YOU EVER BEEN EVICTED/FORECLOSED FROM AN APARTMENT/HOME OR REFUSED TO PAY RENT/MORTGAGE PAYMENTS? YES NO

HAVE YOU EVER LIVED AT THIS OR ANOTHER MONARCH PROPERTY? YES NO

DO YOU INTEND TO HAVE WATER FILLED FURNITURE? YES NO

HAVE YOU OR DO YOU INTEND TO POSSESS, SELL, OR USE ILLICIT DRUGS OR NARCOTICS IN OR ABOUT YOUR RESIDENCE? YES NO

HAVE/ARE YOU OR ANY MEMBER OF THE HOUSEHOLD SUBJECT TO A STATE SEX OFFENDER REGISTRATION PROGRAM IN ANY STATE? YES NO

IF YOU ANSWERED YES TO ANY OF THE ABOVE QUESTIONS, PLEASE EXPLAIN: _____

CONSUMER REPORT AND COLLECTION AUTHORIZATION

I/We acknowledge that in connection with the rental application or lease with The Property and Monarch Management & Realty, Inc. that it is agreed by all parties that; the property, management company or any attorney or collection agents representing The Property, may request any and all information from any law enforcement agency, consumer reporting agency, any current or previous employer, any public records reporting agency, any previous or current landlords, as well as any reference or persons that are or may be deemed necessary by The Property, or any attorney or collection agents representing same. All parties further agree that the undersigned tenant agrees to be responsible for all attorneys' fees and/or collection fees required in connection with collection of any amounts owed to The Property. A thirty-five percent collection fee will be added to each account. These authorizations will continue as long as there remains any amount owed to The Property in connection with the lease agreement.

I/We acknowledge that with this document; that The Property has informed me that I have the right under the "Fair Credit Reporting Act" to request and obtain from the credit reporting agency a copy of my credit report, including a summary of consumer rights regarding the report. I must first pay a reasonable fee to the credit-reporting agency to obtain this report.

I/We agree that The Property, Property Management Company, or any attorney and/or collection agent that The Property employs is authorized to verify any and all information provided by the undersigned or obtained as a result of any of the reports. This would include but is not limited to any consumer reporting agency, law enforcement agency, any public record, any and all previous and current landlords, current or previous employers, as well as persons and personal references that are deemed necessary. In the event of default, the Company has the right to pursue any type of legal action necessary and I agree to repay all costs and fees.

I/We hereby leave \$_____ as a NON-REFUNDABLE application/administrative fee. This application fee covers all credit and criminal report charges. Such sum should not be considered a rental payment or security deposit. In the event that this application is denied, this sum will be retained by the Owner/Agent to cover the costs incurred for processing this application as furnished by applicant. Initial here: _____

I/We hereby leave \$_____ as a good faith deposit to hold an apartment until actual move in date or to be placed on the priority waiting list. This good faith deposit will become a portion of the total security deposit to be determined upon the completion of this application. All funds will be deposited in a security deposit account. If this application is denied, the good faith deposit will be refunded to the applicant(s) according to the governing laws of the State of Indiana. If applicant cancels this application after 72 hours from the time they are assigned a unit, then the good faith deposit is not refundable. Initial here: _____

RENTER'S INSURANCE. Management advises all residents to obtain and keep updated Renter's Insurance for their coverage for loss to their personal property, personal injuries occurring in their apartment, and/or other damages that may occur including damages caused by their guests. It also provides additional living expenses you may incur if your apartment becomes inhabitable. The owner/management is not responsible for resident's personal property. The owner/agent is not responsible for Acts of God, weather or time of war.

I/We understand that the information given herein may constitute grounds for rejection of this application or termination of residency.

I/We understand that if false information is given, this application or lease could be terminated at any time by Owner/Agent and I/We could be subject to criminal or civil penalties.

I/We swear under penalty of law that all of the above information is true and complete.

APPLICANT SIGNATURE _____ DATE _____

CO-APPLICANT SIGNATURE _____ DATE _____

OCCUPANT SIGNATURE(S) 18 YEARS OF AGE AND OLDER _____ DATE _____

_____ DATE _____

_____ DATE _____



VEHICLE INFORMATION

APPLICANT

DRIVER'S LICENSE NUMBER/STATE ID NUMBER _____ STATE _____

VEHICLE MAKE _____ MODEL _____ COLOR _____ YEAR _____

VEHICLE IDENTIFICATION NUMBER (VIN) _____

LICENSE PLATE NUMBER _____ STATE _____

INSURANCE CARRIER _____ POLICY NUMBER _____

CO-APPLICANT

DRIVER'S LICENSE NUMBER/STATE ID NUMBER _____ STATE _____

VEHICLE MAKE _____ MODEL _____ COLOR _____ YEAR _____

VEHICLE IDENTIFICATION NUMBER (VIN) _____

LICENSE PLATE NUMBER _____ STATE _____

INSURANCE CARRIER _____ POLICY NUMBER _____

EMERGENCY CONTACT

NAME _____ ADDRESS _____

HOME PHONE (_____) _____ WORK PHONE (_____) _____

EMAIL ADDRESS _____ CELL PHONE (_____) _____

ADDITIONAL SPACE FOR OTHER QUALIFYING INFORMATION

PREVIOUS EMPLOYER _____ DATES: FROM _____ TO _____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

POSITION/TITLE _____ SUPERVISOR/HUMAN RESOURCE: PHONE (_____) _____ FAX (_____) _____

ANNUAL INCOME _____ TIP/BONUS/COMMISSION INCOME _____

PREVIOUS HOME ADDRESS _____ APT/SUITE # _____

CITY _____ STATE _____ ZIP CODE _____ DATES: FROM _____ TO _____ RENT OWN

NAME OF COMMUNITY/LANDLORD _____ PHONE (_____) _____

MONTHLY RENT/PAYMENT \$ _____ REASON FOR MOVING _____

ADDITIONAL INFORMATION: (Attach a separate sheet of paper if necessary) _____

**THANK YOU FOR CHOOSING
OUR COMMUNITY!**



THE PROPERTY LEASING QUALIFICATIONS AND REQUIREMENTS



EQUAL HOUSING

ALL MONARCH PROPERTIES SUBSCRIBE TO FAIR HOUSING AND WILL NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, CREED, RELIGION, SEX, HANDICAP, FAMILIAL STATUS, NATIONAL ORIGIN, OR AGE.

AVAILABILITY

APPLICATIONS FOR APARTMENTS WILL BE ACCEPTED ON A FIRST COME, FIRST SERVED BASIS AND SUBJECT TO THE AVAILABILITY OF THE APARTMENT TYPE REQUESTED. PREFERENCES ARE NOT GUARANTEED. RENTAL RATES ARE SUBJECT TO CHANGE AT ANY TIME AND WITHOUT NOTICE.

RENTAL APPLICATIONS

APPLICATIONS MUST BE COMPLETED AND MAINTAINED FOR EACH PROSPECTIVE RESIDENT 18 YEARS OF AGE AND OVER WHO WILL BE LIVING IN THE APARTMENT. ANY FALSE INFORMATION WILL CONSTITUTE GROUNDS FOR REJECTION OF THE APPLICATION AND THE LEASE WILL BE NULLIFIED. A CRIMINAL BACKGROUND, CREDIT CHECK AND EMPLOYMENT CHECK WILL BE COMPLETED ON EACH APPLICANT. IT IS UNDERSTOOD BY THE APPLICANT(S) THAT THIS IS PRELIMINARY ONLY AND INVOLVES NO OBLIGATION TO THE LANDLORD OR THE AGENTS OF LANDLORD TO APPROVE THIS APPLICATION OR TO DELIVER OCCUPANCY OF THE APARTMENT.

QUALIFYING STANDARDS

THE FOLLOWING CRITERIA MUST BE MET AND VERIFIABLE:

1. APPLICANT MUST NOT HAVE ANY UNFAVORABLE CRIMINAL HISTORY INCLUDING, BUT NOT LIMITED TO, MISDEMEANOR AND FELONY CHARGES/CONVICTIONS. UNFAVORABLE CRIMINAL HISTORY WILL BE DETERMINED BY OWNER/AGENT. IF THE APPLICATION/RENEWAL SCREENING REVEALS THAT ANY MEMBER OF THE TENANT’S HOUSEHOLD IS SUBJECT TO A SEX OFFENDER REGISTRATION REQUIREMENT, OR THAT THE TENANT HAS FALSIFIED INFORMATION OR OTHERWISE FAILED TO DISCLOSE ANY CRIMINAL HISTORY ON THEIR APPLICATION/RENEWAL FORMS, THE OWNER WILL PURSUE EVICTION OR TERMINATION OF TENANCY TO THE EXTENT ALLOWED BY THEIR LEASE AND STATE OR LOCAL LAW. IF ANY MEMBER OF THE TENANT’S HOUSEHOLD, REGARDLESS OF WHEN THEY WERE ADMITTED, COMMITS CRIMINAL ACTIVITY WHILE LIVING AT THE PROPERTY REGARDLESS OF WHERE THE CRIMINAL ACTIVITY WAS CONDUCTED, THE OWNER WILL PURSUE EVICTION OR TERMINATION OF TENANCY TO THE EXTENT ALLOWED BY THEIR LEASE AND STATE OR LOCAL LAW.
2. APPLICANT MUST HAVE A VERIFIABLE SOCIAL SECURITY NUMBER.
3. APPLICANT MUST PROVIDE VERIFICATION OF EMPLOYMENT FOR A MINIMUM OF ONE YEAR. IN LIEU OF EMPLOYMENT, VERIFICATION OF INCOME MUST BE PROVIDED (PREVIOUS YEAR’S W-2 FORMS, COURT-ORDERED SUPPORT) WE MUST BE ABLE TO VERIFY EMPLOYMENT START (AND END) DATE AND INCOME.
4. IF SELF-EMPLOYED, THE PREVIOUS YEAR’S TAX RETURN AND A BANK STATEMENT SHOWING ADEQUATE CASH COLLATERAL TO COVER RENTAL EXPENSES MUST BE PROVIDED.
5. APPLICANT MUST BE THE LEGAL LESSEE AND HAVE FAVORABLE REFERENCES FROM PREVIOUS LANDLORDS OF AT LEAST ONE YEAR. FAVORABLE IS DEFINED AS: TIMELY PAYMENT HISTORY, NO VIOLATIONS OF MANAGEMENT RULES, FULFILLMENT OF LEASE OBLIGATIONS, AND NO RECORD OF DISRUPTIVE BEHAVIOR. WE RESERVE THE RIGHT TO REJECT AN APPLICATION BASED ON UNFAVORABLE REFERENCES FROM A PREVIOUS LANDLORD. APPLICANTS WITH EVICTIONS FROM PREVIOUS LANDLORDS WILL NOT BE ACCEPTED.
6. MONTHLY RENT MUST NOT EXCEED 36% OF THE RESIDENT’S GROSS MONTHLY INCOME.
7. APPLICATIONS MUST BE ACCOMPANIED BY THE SECURITY DEPOSIT/EARNEST MONEY AND APPLICATION FEE.
8. TOTAL MONTHLY PAYMENTS ON ALL DEBTS INCLUDING RENT MUST NOT EXCEED 55% OF GROSS MONTHLY INCOME.
9. IN ROOMMATE SITUATIONS, EACH IS FULLY RESPONSIBLE FOR THE TERMS OF THE LEASE, JOINTLY AND SEVERALLY, AND MUST COMPLETE A RENTAL APPLICATION.

10. APPLICANTS MUST HAVE RECORDED AND VERIFIABLE CURRENT CREDIT STATUS BASED ON THE FOLLOWING:

- CREDIT HISTORY FOR EACH APPLICANT MUST HAVE AT LEAST 50% FAVORABLE CREDIT. FAVORABLE CREDIT WILL BE DETERMINED BY OWNER/AGENT.
- APPLICANTS CURRENTLY IN CHAPTER 13 BANKRUPTCIES CANNOT BE ACCEPTED. APPLICANTS WITH A DISCHARGED BANKRUPTCY (CHAPTER 7 OR 13) MUST BE CLOSED. LIST OF CREDITORS AND DOCUMENTATION OF DISCHARGE.

CO-SIGNER/GUARANTOR

IF APPLICANT HAS NOT ESTABLISHED, OR HAS UNFAVORABLE CREDIT OR RESIDENTIAL HISTORY, OR IS A FULL-TIME STUDENT, A CO-SIGNER MAY BE REQUIRED. THE CO-SIGNER MUST MEET ALL REQUIREMENTS AND COMPLETE AN APPLICATION. THE CO-SIGNER MUST SIGN THE LEASE, AND IS ADVISED THAT HE/SHE IS INDIVIDUALLY AS WELL AS JOINTLY RESPONSIBLE FOR ALL OBLIGATIONS AS OUTLINED IN THE LEASE.

DEPOSITS

OWNER/AGENT RESERVES THE RIGHT TO CHARGE A HIGHER DEPOSIT BASED ON THE OUTCOME OF THE APPLICATION QUALIFICATION. THE DEPOSIT OR RENTAL AMOUNT FIRST QUOTED TO THE PROSPECT, THEN, MAY NOT APPLY UNDER THESE SPECIAL CIRCUMSTANCES.

CONFIDENTIAL INFORMATION

THE APARTMENT COMMUNITY EMPLOYEES WILL NOT SHARE CONFIDENTIAL INFORMATION OF APPLICANTS AND RESIDENTS WITH ANYONE EXCEPT FOR WHEN IT IS LEGALLY REQUIRED BY THE GOVERNMENT OR WHEN IT IS LEGALLY PERMITTED TO SERVE THE CUSTOMER'S INTEREST FOR VERIFYING INFORMATION IN ORDER TO ACCOMMODATE AND PROTECT THE RESIDENTS. SUCH VERIFICATIONS MAY INCLUDE: SOCIAL SECURITY, EMPLOYMENT, CREDIT, CRIMINAL, RENTAL HISTORY, INCOME/ASSETS, INSURANCE, MORTGAGE, ATTORNEY AND COLLECTION AGENCIES, AND FOR OTHER REASONS NECESSARY TO CONDUCT BUSINESS.

CONDITIONS AND TERMS ARE SUBJECT TO CHANGE AT ANY TIME AND WITHOUT NOTICE

APPLICANT NAME (PRINTED) _____ INITIALS _____

CO-APPLICANT NAME (PRINTED) _____ INITIALS _____