

Riverview Villa Apartments

A SHADOW LAKE MANAGEMENT COMMUNITY



Please print this application and when complete fax to 504.392.3424 or scan and email to manager.rvv@shadowlakemgt.com. Should you have any questions, please call us at 504.392-3401.

After reviewing your application request*, a leasing specialist will contact you. Thank you and we look forward to assisting you with your housing needs.

*This is an application REQUEST for Riverview Villa Apartments. The LEASE AGREEMENT will not become effective until this application is approved by management and a Lease Agreement has been signed by all parties.

RIVERVIEW VILLA APARTMENTS RENTAL APPLICATION

Applicant's Name: _____ Date of Birth: _____ SSN: _____
 Marital Status: _____ Driver License No.: _____ State: _____ email address: _____
 Spouse's Name: _____ Date of Birth: _____ SSN: _____
 Spouse's Driver License No: _____ State: _____ email address: _____
 Phone (home): _____ Phone (work): _____

NAME OF ALL OTHER INDIVIDUALS TO OCCUPY UNIT:

| Name | Date of Birth | Relationship | SSN (If available) |
|------|---------------|--------------|--------------------|
| | | | |
| | | | |
| | | | |

RESIDENT HISTORY

Current Address:

Street (include Apt. No. if applicable) _____ City _____ State _____ Zip Code _____
 Dates: From _____ To _____ Present Landlord/Mgr.: _____ Phone: _____
 Monthly Payment/Rent: _____ Reason for Moving: _____

Previous Address:

Street (include Apt. No. if applicable) _____ City _____ State _____ Zip Code _____
 Dates: From _____ To _____ Present Landlord/Mgr.: _____ Phone: _____
 Monthly Payment/Rent: _____ How Long? _____ Reason for Moving: _____
 Reason for Leasing Here: _____
 Have You Ever Been Evicted From Any Leased Premises? _____ If So, Please Explain: _____

EMPLOYMENT

Current Employer: _____ Phone: _____ Position: _____
 Business Address: _____
 Street _____ City _____ State _____ Zip Code _____
 Supervisor: _____ Employed Since: _____
Spouse's Employer: _____ Phone: _____ Position: _____
 Business Address: _____
 Street _____ City _____ State _____ Zip Code _____
 Supervisor: _____ Employed Since: _____

VEHICLES

Year & Make: _____ Color: _____ License No. & State: _____ Registered To: _____
 Year & Make: _____ Color: _____ License No. & State: _____ Registered To: _____
 Condition of Vehicles: _____
 Give Description and Tag Numbers of Any Boat, Motorcycle, Camper, Van, etc. You May Own: _____

*Do You Own Any Pets? _____ If So, How Many? _____ Kind: _____ Weight: _____ Color: _____

*Requires Specific Written Approval

Emergency Contact:

Name: _____ Relationship: _____
 Address: _____ Phone No.: _____
 Have You Ever Been Involved in any Criminal Activity including Drug Related Action or Activity? Yes or No
 If So, Please Explain: _____ Conviction? Yes or No

INCOME

TOTAL ANTICIPATED INCOME FROM DATE OF MOVE-IN THROUGH THE NEXT TWELVE MONTHS

Checking Account No.: _____ Bank Name and Branch: _____ Avg. Mthly. Balance: _____
 *Annual Salary (Including Fees, Tips, Commission and Bonuses) _____
 Annual Salary (Spouse) _____ + _____
 **Additional Annual Income (Child Support, Parental Support, etc) _____ + _____
 Total Amount of Assets (Stocks, Bonds, Savings Account, Equity in Real Property, Capital Investments, etc)
 \$ _____ INCOME FROM ASSETS _____ + _____
 TOTAL ANTICIPATED INCOME \$ _____

* If self employed, we must be furnished with a notarized statement from your CPA or attorney which indicates the amount of income you expect to receive.
 ** You must furnish us with a notarized statement of this income.

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|------------------------|----------------------------------|-----------------|--|
| Apt. No. _____ | Monthly Rent _____ | Apt. Type _____ | |
| Source _____ | Move-In Date _____ | Pro-In \$ _____ | |
| Lease Dates/Term _____ | | | |
| Leasing Agent _____ | Rent Quote Guaranteed Thru _____ | | |
| Property _____ | | | |

We are an equal housing opportunity provider. We provide rental housing without discrimination on the basis of race, color, religion, sex, physical or mental handicap, familial status, national origin, or other protected classes.

DEPOSIT

The undersigned warrants and represents the information on this rental application to be true and correct. All persons and/or firms named may freely give any requested information concerning me and I hereby waive all right of action for any consequence resulting from such information. This includes a credit check, background investigation and a search of public records including police and criminal files. The undersigned applicant authorizes manager to release any and all information contained in this application on behalf and for the benefit of the undersigned applicant. Applicant hereby acknowledges that an incident log; which contains information of which management has knowledge about suspected criminal activity in the immediate area is available for review at the management office during normal business hours, upon request. Any approval given based on an incomplete or inaccurate application will be subject to revocation at Lessor's discretion.

I hereby deposit the following with management as a good faith deposit in connection with this application for residency.

| | <i>Required Amount</i> | <i>Amount Paid</i> |
|--|------------------------|--------------------|
| <i>Non Refundable Application Fee:</i> | \$ _____ | \$ _____ |
| <i>Security Deposit:</i> | \$ _____ | \$ _____ |
| <i>Pet Deposit:</i> | \$ _____ | \$ _____ |
| <i>Non Refundable Pet Fee:</i> | \$ _____ | \$ _____ |
| <i>Total:</i> | \$ _____ | \$ _____ |

If my application is accepted, I understand the security deposit(s) will become my refundable security deposit upon meeting the terms of the lease and the community rules and regulations. If for any reason management decides to decline my application, then management will refund this good faith deposit and the non-refundable fees, excluding the application fee, to me in full within a reasonable period of time. If this application is approved, and I fail to occupy the premises on the agreed upon date, except for delays caused by construction or the holding over of a prior resident, I understand that management will assess damages against the deposit for the amount of rental loss of all expense incurred due to my cancellation. As these costs are difficult to ascertain I agree to forfeit the refundable portion of the security deposit as liquidated damages for the apartment I agreed to occupy.

| | | | |
|-----------------|------------|-----------------|------------|
| Applicant _____ | Date _____ | Applicant _____ | Date _____ |
|-----------------|------------|-----------------|------------|

WAITING LIST

Waiting list applications and deposits are for an apartment type not a specific unit. Every effort will be made to fulfill preferences such as location, but no guarantee can be made at this time. When the unit type is available, applicant will be contacted at the time applicant's name is next on the list. Applicant must be prepared to occupy the unit within 2 weeks of notification of availability or the stated availability date.

If applicant is unable to take the unit or prefers to wait for a different unit, applicant will drop to the end of the list. Should applicant decide to cancel at this time, applicant's deposit **will be forfeited**.

Waiting List Types:

- 1) Full Deposit - Priority applicant. Applicants will receive first refusal on upcoming available unit on a first come, first served basis.
- 2) Partial Deposit - Secures a secondary position only. Applicants will be called only after full deposit applicants. A full deposit must be secured prior to the assigning of a specific apartment number.

I have read the above and fully understand the procedures governing all waiting list applicants.

| | | | |
|-----------------|------------|-----------------|------------|
| Applicant _____ | Date _____ | Applicant _____ | Date _____ |
|-----------------|------------|-----------------|------------|

Applicant has submitted the sum of \$ _____ which is a non-refundable payment for a credit check and processing charge of this application. Such sum is not a rental payment or security deposit. This amount will be retained by management to cover the cost of processing application as furnished by applicant; any false information will constitute grounds for rejection of application. Applicant agrees to pay an additional fee of \$35 on any items not honored by the bank for any reason.

THE LEASE AGREEMENT WILL NOT BECOME EFFECTIVE UNTIL THIS APPLICATION IS APPROVED BY MANAGEMENT.

TITLE VIII of the CIVIL RIGHTS ACT of 1966 makes discrimination based on race, color, religion, sex, familiar status, or natural origin illegal in connection with the rental of most housing. The Federal agency; which administers compliance with this law concerning this company: Department of Housing and Urban Development.

EQUAL CREDIT OPPORTUNITY ACT


The Federal Equal Credit Opportunity act prohibits creditors from discriminating against credit applicants on the basis of sex or marital status. The Federal agency; which administers compliance with this law concerning this company: Equal Credit Federal Trade Commission, Washington, D.C. 20480.

Qualifications for Residency

1. RENTAL REFERENCES: Applicant must have favorable present and previous rental references and/or housing payment records from non-related sources.*
2. INCOME: Verification of a stable employment history and/or income is required. Applicant must demonstrate financial ability showing minimum monthly gross earnings of three and one half times the monthly rent or sufficient assets to support monthly rental payments.*
3. CREDIT: Application will be processed using a statistical model that compares information on credit profile, such as bill-paying history, the number and type of accounts, late payments, collection accounts, outstanding debt, rental history, and the age of accounts. This information is then compared to the credit performance of consumers with similar profiles. The statistical model only uses information on the applicant that pertains to creditworthiness, it does not use certain characteristics, such as – race, sex, marital status, national origin, or religion in its calculation. The scoring system awards points for each factor that is then used to determine the likelihood of the applicant to meet his or her obligations. *The total score derived is used in the approval or denial of application.*
4. Each applicant must be 18 year or older.*
5. If a person other than the occupant is responsible or co-responsible for rental payments, a completed and approved application is required from the responsible party.*
6. Application processing fee is **non-refundable**. An application fee will be assessed for each occupant 18 years and older
7. Occupancy Rules: (a) Up to 2 persons per bedroom* (b) No unauthorized occupants.
8. Management reserves the right to deny any applicant on the basis of felony criminal conviction, guilty plea or plea of no contest, without regard to the nature of the offense. *

***RECEIVED ATTACHED DETAIL OF QUALIFICATIONS FOR RESIDENCY. INITIAL: _____ INITIAL: _____**

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|---|---|
| Approved: _____ | Disapproved: _____ Tentative Approval Pending Conditions: _____ |
| If this application was disapproved, what was the basis for refusal? | |
| _____ Unfavorable Credit Report | _____ Unfavorable Report From Previous Landlord |
| _____ Unfavorable Employee References | _____ Incorrect Information Submitted on Application |
| _____ Number of Occupants | _____ Number or Size of Pets |
| _____ Other (Specify) _____ | |
| If this application was disapproved, was the applicant given the name and address of the person of the reporting agency that verified the application? Yes _____ No _____ | |
| Managers Signature: _____ | Date: _____ |



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