



4TH STREET LOFTS

APPLICATION FOR RESIDENCY

Each person 18 & older must submit a complete and separate application.

Information contained within and gathered in association with this application is considered CONFIDENTIAL.

GENERAL INFORMATION							
<input type="checkbox"/> Mr. <input type="checkbox"/> Ms.		Name			Social Security / US Visa Number		
Current Street Address		City	County	State	Zip	Phone Number	
Current Landlord Name			Phone Number	Move-In Date	Lease Length	Monthly Payment	
Moving From <input type="checkbox"/> Rental Apartment <input type="checkbox"/> Rental Home/Condo <input type="checkbox"/> Owned Home/Condo <input type="checkbox"/> Family/Friend <input type="checkbox"/> Other _____							
Birth Date		Email		Drivers License / Gov. Issued ID Number			
RENTAL HISTORY							
Previous Address		Move-in Date / Move Out Date		Landlord Phone #		Monthly Payment	
Previous Address		Move-in Date / Move Out Date		Landlord Phone #		Monthly Payment	
INCOME INFORMATION							
Present Employer Name			Address			Work #	
Length of service		Job title		Industry			
Present Employer Name #2 or Previous Employer			Address			Work #	
Length of service		Job title		Industry			
Additional Income Source		Amount		Phone #		Frequency of Payment	
Liquidable Assets Source		Average Balance		Phone #			
Liquidable Assets Source		Average Balance		Phone #			
Total Monthly/Gross Income			Occupation				
OTHER OCCUPANTS							
Name		D.O.B.		Name		D.O.B.	
Name		D.O.B.		Name		D.O.B.	
PET APPLICATION							
Type of Animal	Breed	Name	Sex	Weight	Age	Color	License
Type of Animal	Breed	Name	Sex	Weight	Age	Color	License
VEHICLES							
Vehicle Type		Make		Year		License Plate Number	
Vehicle Type		Make		Year		License Plate Number	
EMERGENCY CONTACT INFORMATION							
Name		Address			Phone Number		Relationship
Name		Address			Phone Number		Relationship

BACKGROUND INFORMATION	
Have you ever:	Been evicted from a tenancy or left owing money? If yes, please provide Property Name, City, State, and Landlord Name. <input type="checkbox"/> Yes <input type="checkbox"/> No
	Been convicted of a crime? If yes, please provide City, State, and Date of Offense. <input type="checkbox"/> Yes <input type="checkbox"/> No
OTHER	
How did you hear about us?	

Co-Signature Addendum

(if applicable)

Please note: A management representative will fill in this section with the exact information used on the Application for Residency. The completed form will be sent to the co-signer.

It is agreed that this Co-signature Addendum is a part of the Application for Residency dated the _____ day of _____, 20____, between RMS Manhattan Out-Parcels, LLC d/b/a 4th Street Lofts, Landlord and _____ Occupant(s) of apartment # _____, at 411 South 4th Street, Manhattan, KS commencing on the _____ day of _____, 20____.

The signature below guarantees the terms, conditions, and obligations of the above mentioned Application for Residency including, but not limited to the payment of the total rent during the term in the amount of _____

The undersigned specifically acknowledge(s) and agree(s) that:

1. I / we are signing this co-signature addendum for the purpose of guaranteeing the financial obligations created by the lease of a dwelling or other property
2. Verification or re-verification of any information contained in the co-signature addendum and/or my/our credit worthiness may be made at any time by a credit reporting agency, and the original copy of this co-signature addendum will be retained by the Landlord even if the lease is not approved
3. In the event the underlying lease payments or other financial obligations under the lease become delinquent, the Landlord, its agents, successors and assigns, in addition to all their other rights and remedies, may report my/our name(s) and account information to a credit reporting agency.

This Co-Signature Addendum may be disapproved as a result of the following credit report decision criteria:

1. Credit history that includes a severe level of credit problems. This includes, but is not limited to: unpaid collections, charge-offs, judgments and/or bankruptcies within two years. Medical debt is not evaluated.
2. Limited or no credit history.
3. Patterns of late payments within two years.
4. Foreclosure within two years.

CO-SIGNER'S INFORMATION: Please Fill out Completely

There is no additional charge outside of the original application fee for the first co-signer credit verification attempt. A \$30 fee per instance will be charged for any additional attempts to verify an alternate co-signer's credit.

Name of Applicant you are co-signing for: _____

Address being leased: 4th Street Lofts, 411 South 4th Street, Manhattan, Kansas 66502: Apartment # _____

Co-Signer's Full Name: _____ DOB: _____

Home Address: _____ City: _____ State: _____ ZIP: _____

Cell/Home Phone: _____ Work Phone: _____ Email: _____

Employer: _____ Address: _____ City, State: _____

SS#: _____ Name of Bank: _____ Bank City, State: _____

Signature: _____ Date: _____

APPLICATION DISCLAIMER

FAIR HOUSING

Landlord complies with the federal housing act and does not discriminate on the basis of race, color, religion, national origin, sex, familial status, disability or on any other basis protected by applicable state, federal or local fair housing laws.

APPLICATION FEE

Each applicant is required to pay a non-refundable application fee in the amount of **\$35.00**. The application fee is not a guarantee of approval for residency. The application fee covers out of pocket costs and Landlord's administrative costs for processing the application.

HOLDING FEE

In addition to the application fee, applicant agrees to pay a holding fee of _____ to hold the apartment identified for occupancy by the undersigned upon approval and execution of the lease. The holding fee is not a guarantee of approval for residency. An apartment will not be held off the market until we receive a completed application and any other required information or monies to rent the apartment. Upon approval of your application, the holding fee will be applied, at our discretion, toward balances due for security deposits, any rental amount required or any other fees at the time of move-in. If the application is denied, the holding fee will be refunded in a check made payable to all co-applicants and mailed to one applicant. Cancellation of the apartment reservation **48 hours** after the date/time that the fee was paid or 24 hours after application approval will result in forfeiture of the holding fee as liquidated damages. There are **7 days** in which to provide all documents necessary for the approval of your application. Failure to supply these documents will result in forfeiture of the holding fee and your application will be cancelled.

RETURNED OR REJECTED PAYMENTS

Returned or Rejected Payments: If a check, credit or debit card is returned or rejected by a bank or other entity for any reason then applicant will be charged a fee of **\$25.00**. This fee will be due along with the original amount and payable by certified funds to Landlord within 24 hours of notification.

RIGHT TO REVIEW THE LEASE

You have the right to review the Rental Application and Lease Agreement before you submit an application or pay any fees or deposits. When signed these are binding legal documents and you may consult with an attorney. When the Lease Agreement is fully executed you will receive an original copy.

REPRESENTATION AND AUTHORIZATION

Representation and Authorization: Applicant acknowledges that they have received and reviewed the Rental Criteria Guidelines and all of the information provided in this application for residency is true and complete. In the event the applicant Provides any false or misleading information in the application, Owner/Agent shall have the right to automatically deny this application and if applicant has already taken possession of the apartment, Owner/Agent reserves the right to take possession of the unit back by means up to and including eviction.

The undersigned applicant hereby consents to allow, Landlord, as owner, or through its designated agents or employees, to obtain a consumer report on the applicant and to obtain and verify credit, criminal history, rental/mortgage history, income and/or employment information for the purpose of determining eligibility to lease an apartment at 411 South 4th Street, Manhattan, KS. Applicant also agrees and understands that owner and its agents and employees may obtain additional consumer reports in the future to update or review applicants account. Upon applicant's request, owner will disclose to applicant whether consumer reports were requested and the names and addresses of any consumer-reporting agency that provided such reports.

The undersigned applicant further understands that the applicant screening process, including the criminal background investigation, in no way guarantees the elimination of persons with a criminal background from the resident base and applicant understands that credit and criminal information is only as accurate as the agency providing such reports. Resident recognizes that owner and its legal representatives do not guarantee, warrant or assure residents personal security and are limited in their ability to provide protection.

SEND COMPLETED APPLICATION TO:

4th Street Lofts
c/o Hilton Garden Inn
410 South 3rd Street
Manhattan, KS 66502

E Mail: 4thstreetloftsmanhattan@gmail.com
Telephone: (785) 761-6562

Applicant Signature

Date

Co-Signer Signature

Date