

Please note that we provide equal housing opportunity. We do not discriminate on the basis of race, color, religion, sex, handicap, national origin, or familial status.

Every applicant must meet the requirements listed below. Please note there is a \$75.00 nonrefundable application fee, this fee is per applicant. Every applicant will have a credit and criminal background check done at the time the application is processed.

#### You can be denied for the following reasons:

#1- Bankruptcies

#2- Evictions

#3- Civil Judgments

#4- Credit score under 600

**#5- Felonies** 

#### #6- Collections

- Lease holder must be 21 years or older, 18 or older may fill out the application as long as the lease holder will be over 21.
- A complete application must be turned in for processing. If items have been omitted then and not explained satisfactorily then
  the application will be returned.
- Two pieces of I.D. must be presented with the application. We require the first be a photo I.D. (either a driver's license or government issued photo identification card).
- Sufficient Income: We require that you list your employment for the past two years. Also prove of the last two pay periods must be provided with the application. Your current employer may be contacted. If you are self-employed, you will have to provide tax returns, a copy of business license, or other verification of your business.

The amounts listed below are the minimum income requirements for Pine Meadows Apartments.

Apt. Size	Monthly Income	Yearly Salary
Studio (Maximum 2 people)	\$1,800.00	\$21,600.00
1 Bedroom (Maximum 3 people)	\$2,000.00	\$24,000.00
2 Bedroom (Maximum 4 people)	\$2,200.00	\$26,000.00



RENTAL AMOUNT \$
------------------

Date of ApplicationApt. Applied For:	
--------------------------------------	--

### Property: PINE MEADOWS APARTMENTS

Referred b	y:

Print Name:		Home Phon	e:		Cell Pho	one:
Social Security #:		Date of Birt	h:	E-Mail Address:		
Current Address:		City:		State:	Zip:	How Long? —
Previous Address:		City:		State:	Zip:	How Long?
CURRENT LANDLORD/MORTGA	GEE INFORMATION	Own R	ent R	esidential Home _	Manufactured l	Home
PRINT NAME:			PHONE	#:		
ADDRESS:			FAX #:			
RENTAL DATES: FROM:	TO:		MONTH	HLY RENT AMO	OUNT:	
PREVIOUS LANDLORD/ MORTO	GAGEE INFORMATION		ı			
PRINT NAME:			PHONE	#:		
ADDRESS:			FAX#:			
DATES: FROM:	TO:		MONTH	HLY AMOUNT:		
OCCUPATION OF APPLICANT						
PRESENT EMPLOYER	SUPERVISOR:			BUSINESS/EN	MPLOYER PH. #	:
	POSITION:			BUSINESS/EN	PLOYER FAX	#:
	ANNUAL INCOME:			EMPLOYMEN	IT DATES:	
PREVIOUS EMPLOYMENT IF LE	SS THAN 4 YEARS ON F	PRESENT JO	ОВ			
PREVIOUS EMPLOYER	SUPERVISOR:			BUSINESS/E	MPLOYER PH.	#:
	POSITION:			BUSINESS/E	MPLOYER FAX	<u></u>
	ANNUAL INCOME:	•		EMPLOYME	ENT DATES:	
IOINT APPLICATION? YES_	ANNUAL INCOME: NOIF 'NO		E PROCI		ENT DATES:  OTHER OCCU	PANTS)
Print Name:		Home Phon	e:		Cell Ph	one:
Social Security #:		Date of Birt	h:		E-Mail Address:	
Current Address:		City:		State:	Zip:	How Long?——
Previous Address:		City:		State:	Zip:	How Long?

# IF CURRENT AND/OR PREVIOUS LANDLORD/MORTGAGEE INFORMATION IS THE SAME FOR JOINT APPLICANT—PLEASE PROCEED TO EMPLOYMENT SECTION.

Rent \_\_\_\_Residential Home \_\_\_\_ Manufactured Home

Own

CURRENT LANDLORD/MORTGAGEE INFORMATION \_\_\_

PRINT INAIVIE.			PHONE #.				
ADDRESS:				FAX #:			
RENTAL DATES: FROM	M: TC	):		MONTH	ILY RENT A	MOUNT:	
PREVIOUS LANDLORD/ M	ORTGAGEE INFO	ORMATION					
PRINT NAME:				PHONE	#:		
ADDRESS:				FAX#:			
DATES: FROM: TO:				MONTHLY AMOUNT:			
OCCUPATION OF JOINT ADDI	LC A NIT						
PRESENT EMPLOYER SUPERVISOR:				BUSINESS/EMPLOYER PH. #:			
	POSITION	<u> </u>		BUSINESS/EMPLOYER FAX #:			
	ANNUAL					ENT DATES:	
DDEVIOUS EMBLOVMENTS	<u> </u>		DECEMT 1	l ∩P			
PREVIOUS EMPLOYMENT PREVIOUS EMPLOYE			KESENI J	ОБ	BUSINESS	S/EMPLOYER PH.#:	
THE VIOLE END EST	POSITIO					S/EMPLOYER FAX#:	
		INCOME: ,				MENT DATES:	
3. OTHER OCCUPANTS - LIST F							
REGULARLY. OCCUPANCY IS I	RESTRICTED TO IND LL NAME	DIVIDUALS LIS		MINAL BA ATIONSHI		DATE OF BIRTH	MED IF 18 yrs  REMARKS
	SE TATAIVIE		KEE	1110110111	1 AGE	DATE OF BIRTH	KLW/ KKS
A AUTOMORILES						<u> </u>	
4. AUTOMOBILES  HOW MANY AUTOS?  APPLICANT # 1 APPLICANT # 2							VERIFIED
MAKE	MODEL YE	AR	CO	COLOR		LIC. PLATE#	STATE
		•			•		
5. OTHER INCOME	AMOUNT		DHONE #			DEFEDENCE	VERIEIED
SOURCE	AMOUNT -	-	PHONE #	•	-	REFERENCE	VERIFIED
	I						

	NAME	ADDRESS	ACCOUNT NUMBER(S
BANK:			CHECKING SAVINGS
BANK:			CHECKING SAVINGS
EMERGENCY IN	FORMATION		
Member of your im	mediate family	Relationship	Telephone Number
treet Address		City & State or Province	Zip Code
Another emergency	contact	Relationship	_Telephone Number_
treet Address		City & State or Province	Zip Code
PERSONAL REFI Personal references ast Name,		f two individuals not related to applicant.  Telephone Number	
ast Name,	First Name	Telephone Number	

REFUNDABLE AT THE TIME OF MOVE OUT IF ALL OF THE TERMS AND CONDITIONS OF THE LEASE AGREEMENT ARE

FOR RENTAL UNIT #\_

IS ONLY

APPLICANT UNDERSTANDS THAT THE DEPOSIT OF \$\_

FULFILLED.

I/We hereby authorize *Screening Reports, Inc.*, to do a complete investigation of all information provided above. I/We have personally filled in and/or reviewed all information listed above. A complete investigation may include any or all of the following: Credit Report, Criminal Record Search, Rental History References, Employment Verifications, Vehicle Records, Licensing Records, Personal Interviews with above references and/or any other necessary information. I/We understand by signing this release, I/We are allowing *Screening Reports, Inc.* to perform a criminal background search on additional occupants for the address applied for. I/We acknowledge that SRI provides reports to apartments/rental units and does not participate in the approval or denial process. I/We acknowledge that SRI monitors criminal activity and reports it promptly to the community. My/Our signature(s) below authorizes all above listed companies to release rental, job history (including salary) and criminal record information.

I/We hereby expressly release SCREENING REPORTS, INC., its affiliates and subsidiaries, and any procurer or furnisher of such information, from any liability whatsoever in the use, procurement, or furnishing of such information. I/We understand that my application information may be provided to various local, state and/or federal government agencies, including, without limitation, various law enforcement agencies.

As an applicant, I represent that the above statements are correct and complete. The information may be used in determining whether to lease to me a home/homesite in the community. I agree that I have no right to occupy a home/homesite in the community until and unless this application is approved, a lease is signed and I have made any necessary initial payments. I understand that any misrepresentation on this application may be cause for lease termination and/or non-acceptance of this application.

Applicant # 1 Print Name	Signature	Date
Applicant # 2 Print Name	Signature	Date

IF ADDITIONAL OCCUPANT IS 18 YEARS AND OLDER AND IS NOT CONSIDERED AN 'APPLICANT', PLEASE SIGN THE RELEASE ON THE NEXT PAGE.

122707

	reening Reports, Inc., to do a complete investigat				
personally filled in and/or reviewed all information listed below. A complete investigation may include any or all of the following: Credit Report, Criminal Record Search, Rental History References, Employment Verifications, Vehicle Records, Licensing Records, Personal interviews with above references and/or any other necessary information. I/We understand by signing this release, I/We are allowing in the sequence of the address applied for. I/We acknowledge that SRI provides reports to apartments/rental units and does not participate in the approval or denial process. I/We acknowledge that SRI monitor provides reports it promptly to the community. My/Our signature(s) below authorizes all above listed companies to release rental, ob history (including salary) and criminal record information.					
information, from any liability wha	EENING REPORTS, INC., its affiliates and substaces in the use, procurement, or furnishing of vided to various local, state and/or federal gove				
information, from any liability wha application information may be pro	tsoever in the use, procurement, or furnishing o	of such information. I/We understand that my			
information, from any liability wha application information may be provarious law enforcement agencies.  Print Name	tsoever in the use, procurement, or furnishing o vided to various local, state and/or federal gove	of such information. I/We understand that my brument agencies, including, without limitation,  Date			
information, from any liability wha application information may be provarious law enforcement agencies.  Print Name	soever in the use, procurement, or furnishing of vided to various local, state and/or federal gove Signature  a 'social security trace/criminal only' report be	of such information. I/We understand that my ernment agencies, including, without limitation,  Date  completed on the following occupant:			

## **VERIFICATION OF EMPLOYMENT**

Date:			
From: Pine Meadows Apartments 1850 Asbury Circle Drive # Joliet, IL. 60435 815-741-4194 (telephone) 815-741-4196 (fax)			
Applicant/Tenant	Socia	Security Num	ber
Applicant/Tenant Address	City	State	ZIP
The above named person has app with our apartment complex. We requested information and returni	ask your co-operatio	on in providing	the
TO BE FILLED OUT BY APPLICAN	IT		
Date of Employment	Position/Occupation	on	
2. Current rate of Pay \$pe	er (hour, week, mont	h)	
3. Number of hours employee nor	mally works		
I certify the above information is t	rue and correct		
Name of Company	Superviso	ors Name	
Address of Company	 Telephon	e Number	