



ALL APPLICANTS WILL BE CONSIDERED FOR APPROVAL ON THE FOLLOWING CRITERIA

- 1. Applicants must be of legal age (18 years or older)
2. Applicants must provide a valid government issued identification.
3. Applicant grants permission for a credit check to be completed.
4. Monthly income must be a minimum of 2 to 2 1/2 times the monthly rental amount & employment must be verifiable for a minimum of 6 months.
5. Must have current verifiable residency.
6. Applicant may be denied if evicted from a prior rental within the last three years or has an outstanding balance with a prior rental.
7. The maximum persons allowed per bedroom is two, plus one individual. See Example:
- A maximum of 3 people in a 1 bedroom/1 bath
- A maximum of 5 people in a 2 bedroom/1 bath
- A maximum of 7 people in a 3 bedroom/2 bath
- A maximum of 9 people in a 4 bedroom
8. Application may be denied due to credit worthiness rating.
9. Applicant may be denied if any information has been falsified.
10. Applicant may be asked for an additional deposit based on credit score and employment history.
11. Applicant must provide all necessary documentation in order to process application at time of submission, If applicant fails to provide this information within forty-eight (48) hours this application will be cancelled and the application fee forfeited.
12. Pets are limited to two per apartment and they may not exceed forty pounds full grown. Pet owners are required to pay a non-refundable pet fee of \$200.00 per pet.

.....DEPOSIT/APPLICATION FEE.....

- 1. Application fee must be paid prior to an application being processed. All applicants are processed by an outside, independent screening service.
2. A security deposit or holding deposit is required to be paid before an apartment will be taken off the market and assigned. A minimum of no less than \$150.00 will be accepted to hold an apartment.
3. Applicant understands that if application data is not provided within forty-eight (48) hours of the submission of the application, the application will automatically be cancelled, and the deposit will be forfeited.
4. If the applicant cancels this application within seventy-two (72) hours of its submission, the deposit less the application fee is refundable. If applicant cancels this application after 72 hours, the deposit is forfeited.

I HAVE READ AND UNDERSTAND THE CRITERIA FROM WHICH MY APPLICATION WILL BE APPROVED. APPLICATION MAY BE APPROVED WITH CERTAIN RESTRICTIONS. THESE RESTRICTIONS MAY OR MAY NOT LIMIT APPLICANTS ABILITY TO PARTICIPATE IN CURRENT RENTAL INCENTIVES.

Applicants:

Property Manager

Date

Three horizontal lines for signature and date.

## APPLICANT ACKNOWLEDGMENT

(friend/relative)

Property Name: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

I do not currently reside in an apartment or home that is under my name, I currently rent/stay with a family member or friend. I understand the property owner requires a landlord verification from a complex or real estate company and does not accept family or friend verifications. My application may still be approved, but I understand I will pay a higher refundable deposit, higher move in costs, or both.

Name of family member or friend: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name of complex: \_\_\_\_\_

How long have you lived there: \_\_\_\_\_ If you pay rent, how much? \_\_\_\_\_

I understand that falsifying this information will result in denial of my housing application, I understand the Manager will search Maricopa County public records and perform a credit/criminal background screening to verify this information. I further state, that I am not currently in the process of being evicted from any housing.

Applicant Name: \_\_\_\_\_

Date: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

<b>For Office Use Only:</b>
Date Rcvd: _____
Price Quoted: _____
Unit Size: _____
Disc. Amount: _____

# Transpacific Asset Mgmt. Housing Application

**EACH APPLICANT 18 AND OLDER MUST COMPLETE A SEPERATE APPLICATION. AN APPLICATION FEE OF \$25.00 PER APPLICANT IN THE FORM OF A MONEY ORDER IS DUE AT THE TIME YOU TURN IN YOUR APPLICATION.**

- Application fee will not be refunded or returned if you are denied or decide not to move in.
- Deposits are based on rental history, income and criminal background screening
- **Falsifying your application will result in denial. Please be honest on the application.**

Full Name: \_\_\_\_\_  
First
Full Middle Name
Last

**Full name must be completed. Do not enter an initial for the middle name, or leave blank. If you do not have a middle name write none.**

\_\_\_\_\_  
Date of Birth Phone Number

\_\_\_\_\_  
Driver's License Number and State Social Security Number

**Residence History**

Current Rent Payment: \$ \_\_\_\_\_ How Long?: \_\_\_\_\_

Is this a family member or friend? \_\_\_\_\_

Current Address: \_\_\_\_\_

Apartment #: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Complex / Landlord Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

**If you have been at your current address for less than two years, please complete the following:**

Previous Payment: \$ \_\_\_\_\_ How Long?: \_\_\_\_\_

Current Address: \_\_\_\_\_

Apartment #: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Complex / Landlord Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Employment**

Current Employer: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ How Long?: \_\_\_\_\_ Start Date: \_\_\_\_\_

Department/Position: \_\_\_\_\_ Approximate Monthly Gross Income: \_\_\_\_\_

**If you have been with your current employer less than one year, please complete the following:**

Previous Employer: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ How Long?: \_\_\_\_\_ Start Date: \_\_\_\_\_

Department/Position: \_\_\_\_\_ Approximate Monthly Gross Income: \_\_\_\_\_

Please provide your 2 most recent paystubs or proof of income.

**Other Income:** \_\_\_\_\_ **Monthly:** \_\_\_\_\_

**Credit and Background History (Failure to answer the questions honestly will result in automatic denial of application. We check all credit and background history that has occurred in your lifetime.)**

Have you ever been evicted?  Yes  No  
 How many Times? \_\_\_\_\_ Date of eviction(s) \_\_\_\_\_  
 Has a notice of eviction ever been filed against you?  Yes  No  
 Date of Notice: \_\_\_\_\_  
 Have you ever declared bankruptcy?  Yes  No  
 Have you had two or more late rental payments in the past year?  Yes  No  
 Have you ever willfully or intentionally refused to pay the rent when due?  Yes  No  
 Do you currently owe any monies to an apartment community or landlord?  Yes  No  
 What is the date the money is due from: \_\_\_\_\_  
 Are you now addicted to any controlled substances (illegal drugs)?  Yes  No  
 Have you ever been addicted to any controlled substances (illegal drugs)?  Yes  No  
 Have you ever engaged in the distribution or sale of illegal drugs?  Yes  No  
 Are you now or have you ever been associated with a street gang?  Yes  No  
 Are you now or have you ever been a registered sex offender in any state?  Yes  No  
 Have you ever been convicted, arrested or charged with any crime?  Yes  No  
 How many times: \_\_\_\_\_ Date of Charge(s) \_\_\_\_\_ Type of charge: \_\_\_\_\_  
 Have you ever been convicted of a felony?  Yes  No  
 How many? \_\_\_\_\_ Date of charge: \_\_\_\_\_ Type of charge: \_\_\_\_\_  
 Have you ever been convicted of a crime, the nature of which would threaten the health and safety of the tenants, management, or staff?  Yes  No  
 Do you have any outstanding warrants or anticipate any warrants for arrest?  Yes  No

**List all people who will live in the apartment (all persons 18 years of age and older, must complete a separate application)**

**1.** Name: \_\_\_\_\_ Social Security # \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Relationship: \_\_\_\_\_

**2.** Name: \_\_\_\_\_ Social Security # \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Relationship: \_\_\_\_\_

**3.** Name: \_\_\_\_\_ Social Security # \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Relationship: \_\_\_\_\_

**4.** Name: \_\_\_\_\_ Social Security # \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Relationship: \_\_\_\_\_

**5.** Name: \_\_\_\_\_ Social Security # \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Relationship: \_\_\_\_\_

**6.** Name: \_\_\_\_\_ Social Security # \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Pet Information**

Will there be any pets in the home?  Yes  No

Breed: \_\_\_\_\_ Weight at Full Grown: \_\_\_\_\_ Color: \_\_\_\_\_

Breed: \_\_\_\_\_ Weight at Full Grown: \_\_\_\_\_ Color: \_\_\_\_\_

Is this an assistive or service animal?  Yes  No

**Emergency Contact**

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

**Authorization to perform rental screening, credit and criminal background check**

In compliance with the FAIR HOUSING REPORTING ACT this notice is to inform you that the processing of this application includes but is not limited to making any inquiries deemed necessary to verify the accuracy of the information herein, including procuring consumer reports from Consumer Credit Reporting Agencies and obtaining credit information from other Credit institutions for the purpose of obtaining a rental/lease agreement.

Applicant represents that all of the above statements are true and complete, and hereby authorize verification, now and in the future, of above information, references and credit records. Applicant acknowledges that ANY false information contained herein constitutes grounds for rejection of this application if discovered before or after move in. Management reserves the right to verify application information after move in. This application is preliminary only and does not obligate the owner or representative to execute a lease or deliver possession of proposed premises. By signing this application, applicant authorizes all persons/firms named and unnamed in this application to freely provide any and all requested information concerning applicant and hereby waive all right of action for any consequences resulting from such information.

**NOTICE TO ALL APPLICANTS AND CURRENT RESIDENTS REGARDING CRIMINAL BACKGROUND CHECK**

The undersigned applicant/resident hereby acknowledges that the Landlord performs criminal background checks on all applicants, current residents, and all members of the household (including minor occupants) both at the time the prospective tenant submits an application and prior to offering to renew a lease agreement. This process checks the background of all persons to determine if the applicant, a current resident, or a member of the residents household has committed any crimes within the past 10 years, is subject to a lifetime registration requirement under a State Sex Offender Registration program or has plead guilty, plead no contest, or been found guilty of any crime.

Applicant/Tenant must mark the appropriate box and sign below:

- I affirm that neither I, nor any member of my household, is subject to a lifetime registration requirement under a State Sex Offender Registration program
- I affirm that neither I, nor any member of my household, has committed any crimes within the past 10 years or has plead guilty, plead no contest, or been found guilty of any crime

**WARNING: IF THIS PROCESS REVEALS THAT YOU OR A MEMBER OF YOUR HOUSHOLD IS SUBJECT TO REGISTER AS A SEX OFFENDER OR IF YOU WITHHOLD/FALSIFY ANY INFORMATION ON THIS FORM OR IN THE APPLICATION OR RENEWAL PROCESS, YOUR APPLICATION WILL BE DENIED/LEASE WILL BE IMMEDIATELY TERMINATED.**

Applicant Name: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**LANDLORD VERIFICATION**

Property Name: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Current/Previous Landlord: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of person verifying information: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

MONTHLY RENT: \_\_\_\_\_

NUMBER OF 5 DAY NOTICES: \_\_\_\_\_

DOES THE TENANT PAY ON TIME? \_\_\_\_\_

DOES THE TENANT FOLLOW POLICIES? \_\_\_\_\_

IS THE UNIT KEPT CLEAN? \_\_\_\_\_

DID THE TENANT GIVE NOTICE TO VACATE? \_\_\_\_\_

WAS THE TENANT EVER PROCESSED FOR EVICTION? \_\_\_\_\_ IF YES, HOW MANY TIMES? \_\_\_\_\_

IS THE TENANT IN THE PROCESS OF BEING EVICTED? \_\_\_\_\_

ADDITIONAL COMMENTS: \_\_\_\_\_

I authorize you to provide the above requested information to the requesting party, for the purposes of approval for housing.

\_\_\_\_\_  
Applicant Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Signature