

Emerson Property Management Student Rental Application

Please Print & Answer *ALL* Questions!

Tell Us About YOU!

Your Name: _____ Date: _____

Date of Birth: _____ Gender: Male Female
Social Security #: _____ Driver's License#: _____
Desired Move-In Date: _____ Furnished? Y N Age As of Today: _____

I Am A: Freshman Sophomore Junior Senior Grad Student
Attending (Name of College/University): _____
My Area of Study: _____

Current Address: _____ City: _____ State: _____ Zip: _____
Name of Community or Dorm: _____
Home Address: _____ City: _____ State: _____ Zip: _____

I Would Describe Myself As:

Very Neat	Average	Messy
Quiet	Average	Loud
Studious	Average	Never Crack a Book
A Non-Smoker		A Smoker
A Non-Drinker	Social Drinker	A Heavy Drinker
Laid-Back	Gamer	Social Butterfly
		Sports Are My Life

And You Should Know This About Me: _____

I am Bringing Roommates: Yes No

Name: _____ Age _____ Phone#: _____
Name: _____ Age _____ Phone#: _____

The Not-Too-Fine Print:

Security Deposit in the sum of \$_____ is made with the clear understanding that this application, including each prospective occupant, is subject to approval and acceptance. The applicant agrees to execute a lease and pay the prorated and/or first month's rent before possession is given. **The applicant has a maximum of three days within which to cancel this application in writing and have his/her security deposit returned to him/her. If this application is cancelled after 3 days, or should the applicant not execute a lease or occupy premises, the security deposit will be forfeited.** If application is not approved by the owner/agent, the security deposit will be returned. The Application Fee of \$_____ and the Reservation Fee of \$_____ are non-refundable.

By signing, the applicant gives permission for the Landlord or agent to investigate the information supplied on this application and a full disclosure of pertinent facts may be made to the Landlord. Applicant understands that approval process will include a review of credit history and criminal background check. Furthermore, the undersigned declares that the information provided on this application is true and correct and false statements or information may result in the rejection of this and future applications for housing managed by Emerson Property Management.

Applicant Signature: _____ Date: _____

Emerson Property Management Roommate Matching Form

Tell Us About Your IDEAL Roommate!

My Ideal Roommate:	Male	Female	
Very Neat	Average	Messy	
Quiet	Average	Loud	
Studious	Average	Never Crack a Book	
A Non-Smoker		A Smoker	
A Non-Drinker	Social Drinker	A Heavy Drinker	
Laid-Back	Gamer	Social Butterfly	Sports Are My Life

More Not-Too-Fine Print:

By signing below, I understand that this information will be made public to other residents in search of roommates. I acknowledge that the Landlord is not responsible or liable for any claims, damages, or actions of any nature whatsoever relating to, arising out of or connected with disputes between potential or selected roommates. The Landlord abides by Federal Fair Housing Laws when assigning roommates. I acknowledge that the Landlord strives to accommodate the desired apartment size and roommate preferences, however Landlord cannot guarantee all preferences can be met. If I do not advise Landlord of my preferred Roommates, Landlord will assign Roommate(s) to my unit. If any facts are determined false, it shall constitute a default of this Agreement pursuant to Paragraph 35, and in such an event, Lessor shall have all the rights and remedies set forth in this Agreement, including but not limited to Lessor's ability to terminate Resident's tenancy immediately and seek possession of the Premises and collect from Resident any damages incurred, including reasonable attorney's fees.

Applicant Signature: _____ **Date:** _____

CO-SIGNER RENTAL APPLICATION

PLEASE ANSWER ALL QUESTIONS

This applicant is Co-Signer for _____
(Name of resident to occupy apartment)

CO-SIGNER INFORMATION:

Applicant's Name: _____ Date _____

Social Security Number: _____ Date of Birth: _____

Driver's License #: _____ E-Mail Address: _____

Telephone #: (home/mobile) _____ (work) _____

Check one: Married Divorced Separated Single

Present Address _____

Check one: Own home Rent Other

Name of Mortgage Company or Apartment Community: _____

Telephone # of Apt. Comm. or Mort. Comp: _____

Monthly Rent or Mortgage payment: \$ _____

Employed by: _____ Position/Title: _____

How long on job: _____ Income: \$ _____ Hourly/ Monthly/ Yearly

Supervisors Name: _____ Telephone #: _____

If you would like us to consider a spouse, please complete information below.

Spouse's Name _____ Social Security #: _____

Date of Birth: _____ Driver's License #: _____

Employed by: _____ Position/Title: _____

How long on job: _____ Income: \$ _____ Hourly/ Monthly/ Yearly

Supervisors Name: _____ Telephone #: _____

By signing, the applicant(s) gives permission for the Landlord or agent to investigate the information supplied on this application and a full disclosure of pertinent facts may be made to the Landlord. **Applicant understands that approval process will include a review of credit history and possible criminal background check.**

Furthermore, the undersigned declares that the information provided on this application is true and correct and false statements or information may result in the rejection of this and future applications for housing managed by Emerson Property Management.

Applicant Signature _____ Date _____

Spouse's Signature _____ Date _____

WHY WE ASK FOR THIS INFORMATION...

By Co-Signing for resident listed above, you are asserting (through good credit and verifiable income) that should the resident default on payment, you will be responsible for the amount due to management. We verify co-signer's ability to pay through credit reporting agencies, including but not limited to SafeRent and EquiFax Credit Reporting Agencies. We must have all the information requested on this application for proper checks to be completed. For your safety, we hold this information confidential

CO-SIGNER ADDENDUM TO LEASE
Collegiate Courtyard

This portion of the application is the actual co-signer agreement for said lease at Collegiate Courtyard. This co-signer agreement is an addendum to the lease between Emerson Property Management and the resident(s) and will obligate you for any and all rents and damages incurred by the resident(s) that may become due to Emerson Property Management over the term of the lease. The resident(s) name, the rent, and lease term need to be filled in by you below in the appropriate spaces and then please sign at the bottom in the presence of a public notary. Then simply return the form to the property Leasing Office.

**INITIAL
ALL 6
LINES
BELOW:**

CO-SIGNER AGREEMENT TERMS:

- 1. Apartment Complex: _____ Collegiate Courtyard _____ *
- 2. Full name of Resident to be guaranteed by this Contract: _____ *
- 3. Relation of Resident to Co-Signer: _____ *
- 4. Monthly amount to be guaranteed for the Term of the Lease (RENT) _____ *
- 5. Lease Start Date: _____ *
- 6. Lease End Date: _____ *

I (We), the person (People) named at the top of this application, do hereby guarantee full performance of the Lease between TENANT stated above, residing in the above named apartment complex and EMERSON PROPERTY MANAGEMENT, LANDLORD, for the duration of the lease and **any lease renewals**.

Co-Signer's Signature Date (SEAL)

Co-Signer Signature Date (SEAL)

I, _____, a notary public for _____
Notary Public's Name County State

Do hereby certify that _____ personally appeared before me on
Co-Signer (and Spouse) Name(s)
this day and acknowledge the due execution of the foregoing instrument.

Witness my hand and official seal this, the _____ day of _____, 20_____.

Notary Public's Signature

My Commission Expires: _____

(Notary's Seal)

EMPLOYMENT/INCOME VERIFICATION

Preferably a Paystub

This request for verification of employment or income information on the below reference individual is part of the application approval process for residency in an apartment community managed by Emerson Property Management

Property: _____ Collegiate Courtyard _____

This applicant is Co-Signing for: _____
(Name of resident to occupy apartment)

I, _____ (_____)
Signature of Co-Signer Printed Name of Co-Signer

give permission for the information requested below to be released to Emerson Property Management for the purpose of application approval.

Company Name: _____

Applicant's position with company: _____

Dates of employment: From: _____ To: _____

Rate of pay: \$ _____ Hourly Weekly Bi-weekly Monthly Yearly

Average number of hours in work week: _____

Probability of continued employment: _____

*Name and title of person verifying information:

(Please print name)

(Please print title)

(Signature of person verifying information)

**This cannot be the co-signer.*

You may also submit a copy of your most recent pay stub rather than using this form. Thank You!