

BLUESTONE APARTMENTS OCCUPANCY REQUIREMENTS

***Renters Insurance is Required ***Will need copy of ID's and proof of Income

\$_____ Application Fee in a Check or Money Order

Bluestone Apartments provides an equal housing opportunity for all. Applicants must be 18 years of age or older and must show a valid picture identification before the application is processed. Applications for residency are reviewed and a determination of approval or denial is made based on the criteria set out below. The minimum security deposit is \$199. Additional security deposit not to exceed one month's rent may be required based on three factors: residency/rental history, employment/income history, and credit history.

1. **Residency/Rental History:** We verify residency and/or rental history for the past two years. The applicant's rental history during the past two years must be satisfactory and must not have more than four late payments per year. Any history of checks returned for non-sufficient funds will require payment by money order only. The applicant must be free of any eviction within the last two (2) years and have current positive non-familial rental history for at least one (1) year. The applicant must be free of any unpaid landlord judgment. Lack of verifiable non-familial rental history in the last year or a mortgage foreclosure/surrender will require one-month rent deposit.

2. **Employment/Income History:** We verify all sources of income. The monthly rent for the apartment requested must not exceed 35% of the household's total monthly sources of funds. Minimum income requirements must be met with verifiable income only. Unemployment wages are counted as verifiable income however; the guaranteed benefit amount must cover the rent for the full 12 month lease. Temporary employment wages may not be a household's only source of income.

Employment, including self-employment, **must be current for six months and must be verifiable.** Self-employed applicants must provide two years of federal income tax returns to be considered for occupancy. An additional \$100 security deposit is required if current employment is for less than six months.

3. **Credit History:** A credit report will be processed. The Rent Wise scoring method provided to us by Credit Bureau Companies is utilized to assess applicant's credit history. RentWise scores are as follows:

699 or Below	Decline (No Exceptions)
700 to 799	Accept with one month's rent security deposit
800 & Above	Accept

In addition, any outstanding gas/electric/water and sewer utility accounts must be paid and proof of payment submitted to leasing office before move in. Applicants must not be in the process of filing bankruptcy and all filed bankruptcy proceedings must be discharged and stated on credit report

4. **Criminal History:** Inquiries may be made of each applicant as to criminal background. Applicants must be clear of on going criminal activity. Applicants must be clear of any felony convictions for five years from the date of conviction; however any felony convictions involving bodily harm or sexual offenses are not permitted.

5. **Occupancy:** Occupancy is limited to the individuals identified on the lease. No more than two persons are permitted to occupy or share a bedroom. ***If a new member is requested to be added, management must approve the addition.***

Bluestone does not insure the resident or the resident's possessions. Residents must maintain their own fire, casualty and liability insurance in order to be covered for these potential losses.

I have read and understand the occupancy guidelines for residency at Bluestone. I wish to have my application reviewed and processed. I understand that the application fee is non-refundable.

Signature: _____ Date: _____

Signature: _____ Date: _____

PERSONAL INFORMATION				
Full name of applicant		Home phone number	Date of birth	Age
Social Security #	Drivers license #	State issued		
Full name of co-applicant			Date of birth	Age
Social Security #	Drivers license #	State issued		
List all others who will be occupying the apartment				
Name	Date of birth	Age	Soc. Sec. #	Relationship to Applicant
Name	Date of birth	Age	Soc. Sec. #	Relationship to Applicant
Name	Date of birth	Age	Soc. Sec. #	Relationship to Applicant
Name	Date of birth	Age	Soc. Sec. #	Relationship to Applicant

RESIDENT HISTORY					
If additional space is needed, please attach a separate page. MUST HAVE 2 YEARS OF RENTAL HISTORY.					
A P P L I C A N T	Applicant's Present Address (check one) <input type="checkbox"/> Apartment <input type="checkbox"/> Leased Home <input type="checkbox"/> Own Home <input type="checkbox"/> Other:				
	Present Street Address	Apt. #	City	State and Zip	
	Present landlord/mortgage company	Monthly rent or mortgage \$	Dates: From: / / To: / /		
	Address of landlord/mortgage company	Landlord/mortgage company phone #	Is landlord a relative? Yes <input type="checkbox"/> No <input type="checkbox"/> relationship		
	Is your lease/mortgage in any other name? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please explain and provide name.		What is your reason for moving?		
	Applicant's Previous Address (check one) <input type="checkbox"/> Apartment <input type="checkbox"/> Leased Home <input type="checkbox"/> Own Home <input type="checkbox"/> Other:				
	Present Street Address	Apt. #	City	State and Zip	
Present landlord/mortgage company	Monthly rent or mortgage \$	Dates: From: / / To: / /			
Address of landlord/mortgage company	Landlord/mortgage company phone #	Is landlord a relative? Yes <input type="checkbox"/> No <input type="checkbox"/> relationship			
Was your lease/mortgage in any other name? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please explain and provide name.		What is your reason for moving?			
C O - A P P L I C A N T	Spouse's Present Address (check one) <input type="checkbox"/> Apartment <input type="checkbox"/> Leased Home <input type="checkbox"/> Own Home <input type="checkbox"/> Other:				
	Present Street Address	Apt. #	City	State and Zip	
	Present landlord/mortgage company	Monthly rent or mortgage \$	Dates: From: / / To: / /		
	Address of landlord/mortgage company	Landlord/mortgage company phone #	Is landlord a relative? Yes <input type="checkbox"/> No <input type="checkbox"/> relationship		
	Is your lease/mortgage in any other name? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please explain and provide name.		What is your reason for moving?		
	Spouse's Previous Address (check one) <input type="checkbox"/> Apartment <input type="checkbox"/> Leased Home <input type="checkbox"/> Own Home <input type="checkbox"/> Other:				
	Present Street Address	Apt. #	City	State and Zip	
Present landlord/mortgage company	Monthly rent or mortgage \$	Dates: From: / / To: / /			
Address of landlord/mortgage company	Landlord/mortgage company phone #	Is landlord a relative? Yes <input type="checkbox"/> No <input type="checkbox"/> relationship			
Was your lease/mortgage in any other name? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please explain and provide name.		What is your reason for moving?			

EMPLOYMENT HISTORY

If additional space is needed, please attach a separate page.

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Current Employer:

Street Address		City		State	Zip
Phone Number		Supervisor		Title	
Position		Employment Dates		Gross Income \$	
		_____ TO _____			
Reason for Leaving					

Previous Employer if less than 6 months:

Street Address		City		State	Zip
Phone Number		Supervisor		Title	
Position		Employment Dates		Gross Income \$	
		_____ TO _____			
Reason for Leaving					

Current Employer:

Street Address		City		State	Zip
Phone Number		Supervisor		Title	
Position		Employment Dates		Gross Income \$	
		_____ TO _____			
Reason for Leaving					

Previous Employer if less than 6 months:

Street Address		City		State	Zip
Phone Number		Supervisor		Title	
Position		Employment Dates		Gross Income \$	
		_____ TO _____			
Reason for Leaving					

Other Income (Explain)

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APARTMENT REQUIREMENTS AND OTHER MATERIAL INFORMATION			
Number of bedrooms needed?	Date you are needing an apartment?	Where did you hear about us?	
Is there anyone living with you now who won't be living with you at this property? Who? / Explain:			Yes <input type="checkbox"/> No <input type="checkbox"/>
Do you expect any additions to your household within the next twelve months? Who? / Explain:			Yes <input type="checkbox"/> No <input type="checkbox"/>
Are there any absent household members who under normal conditions would live with you? Who? / Explain:			Yes <input type="checkbox"/> No <input type="checkbox"/>
Does an adult of this household have primary physical custody of every child listed on this application? If not - Explain: Not Applicable <input type="checkbox"/>			Yes <input type="checkbox"/> No <input type="checkbox"/>
Does your household have or anticipate having any pets other than those used as service animal? Describe:			Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you or any one else named on this application filed for bankruptcy? Explain (provide dates):			Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you or any one else named on this application been convicted of a felony? Explain:			Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you or any one else named on this application a registered sex offender?			Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you or any one else named on this application been convicted of dealing or manufacturing illegal drugs? Explain:			Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you or any one else named on this application had legal action taken against you for nonpayment of a bill? Explain:			Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you or any one else named on this application broken a rental agreement or lease contract? Explain:			Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you or any one else named on this application been sued for property damage? Explain:			Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you or any one else named on this application been evicted or asked to move from a rental unit of any type including an apartment, home, mobile home or trailer ? Explain:			Yes <input type="checkbox"/> No <input type="checkbox"/>
MISCELLANEOUS INFORMATION			
How many autos would you keep at this property?			
Make	Model	Year	Color
In case of emergency, notify:	Work phone #	Home phone #	Relationship
Street Address:	City/State/Zip:	In the event of serious illness or death of resident, the above person may <input type="checkbox"/> or may not <input type="checkbox"/> enter, remove and/or store all contents found in the dwelling, common areas, or mailbox.	

APPLICATION FEE & SIGNATURE CLAUSE

Applicant submits the sum of \$ _____ which is a non-refundable processing charge, receipt of which is acknowledged by Management. Such sum is not a rental payment. This application along with an applicant questionnaire completed by each adult in the household must be completed in total and signed before Management will process it. I/We certify that answers given herein are true and complete to the best of my/our knowledge. I/We authorize verification or investigation of all statements contained in this application via consumer credit reports, rental history reports, criminal history reports and other means. Such authorization does not require the owner or its agents to make verifications or investigations. Failure to answer any of the above inquires shall entitle owner to reject this application. False information given above shall entitle owner to (1) reject this application, (2) retain the application fee(s) and deposit/fee as liquidated damages for owner's time and expenses of processing this application, and (3) terminate resident's right of occupancy. Owner reserves the right to regularly and routinely furnish information to consumer reporting agencies about performance of lease obligations by residents. Such information may be reported at any time and may include both favorable and unfavorable information regarding a resident's compliance with the lease, rules, and financial obligations. Owner and/or Property Manager have no duty to provide emergency care or give notice of emergency to any person and shall not be liable to applicant, Resident, any occupant, or any guest for failure to do so.

THIS APPLICATION IS NOT A RENTAL AGREEMENT, CONTRACT OR LEASE. ALL APPLICATIONS ARE SUBJECT TO THE APPROVAL OF THE OWNER OR MANAGING AGENT.

Signature of Applicant

Date

Signature of Spouse

Date

Signature of Lessor's Representative

Date