

# WORKFORCE STATEMENT OF QUALIFICATIONS Gallery at Fat Village June 9<sup>th</sup>, 2025

When you meet the application standards you will have the peace of mind of knowing that you will be joining other residents who have also met strict standards.

If your application meets all the following criteria, you will be approved. If it does not, you may be approved with conditions, which may require you to pay an additional security deposit or obtain a guarantor (in communities where permitted). If you do not meet the requirements set forth, your application will be denied.

**NOTE:** We do business in accordance with the Fair Housing Act. It is illegal to discriminate against any person because of race, color, religion, sex, handicap, familial status, or national origin, and any other characteristic protect by federal, state, or local law.

#### **APPLICATION SCREENING REQUIREMENTS**

<u>A complete application:</u> All lines must be filled in and questions answered for the application to be processed. All applicants over the age of 18 must complete an application, and all occupants over the age of 18 must sign the lease along with the lease holder(s). Any person under the age of 18 must be listed as an occupant on the lease.

Two (2) forms of identification: We require at least one valid government-issued photo identification document (ID) for all applicants over the age of 18. If your social security card is marked VALID FOR WORK ONLY WITH DHS AUTHORIZATION and you report income, you must provide the authorization card as well. Social Security cards are required for all HOME Assisted units.

**Verifiable rental history:** The standard approval process requires verifiable rental history for the last two, (2) years. It is your responsibility to provide necessary information that allows us to contact your past landlord(s) for this information. You must have a history of paying your rent on time, have given proper notice, have no dispossessory warrant(s) filed, and must not owe any money to your landlord. If we are unable to verify your previous landlord(s) and/or references, or if you have no rental history, we reserve the right to charge additional security deposit and/or deny your application if the other criteria set forth are not met. Verifiable for these purposes means THIRD PARTY verification from someone other than a relative. We will consider a mortgage as rental history if it has been active within the past two (2) years. However, if the mortgage is late or in default, you will be asked to give the reason why, show documentation to support the reason, and may be required to pay additional security deposit providing the other criteria set forth are met.

<u>Income eligibility:</u> To become eligible for approval you must meet the monthly requirement set forth by this community which is 2.5 times the tenant paid rent per month. Income will be verified by THIRD PARTY. Some examples include employment verification, the collection of six (6) to 10 consecutive paystubs depending on program requirements, the collection of SSI, SSD, SSA confirmation letters, the collection of legal settlement and divorce agreements, any other legal paperwork reflecting income (i.e. Child



Support documentation, the collection of bank statements (when applicable), and the collection of IRA, 401K, or other asset statements). A complete list of income documentation will be provided to you by the property staff once the initial interview for application is complete.

For applicants that are reporting income from a contributor (a person who makes regular monthly contributions to the applicant), the following applies:

- 50% of income or less from contribution A notarized affidavit from the contributor (form
  to be provided by office) AND six (6) months bank statements showing the amount of the
  contribution as a deposit. If the applicant cannot provide bank statements proving the
  contribution, then the contributor must be added as a GUARANTOR for the leaseholder.
- More than 50% of income from a contribution Supply the above documentation, PLUS the contributor must become a GUARANTOR for the leaseholder and earn at least FIVE (5) times the monthly rent, have verifiable impeccable credit, and score automatic approval (no conditions). Criminal history of guarantors will be considered. Guarantors must complete a Guarantor Pre-Leasing Application and pay the applicable application fee. Guarantors must also sign a Lease Contract Guaranty which must be signed in person at our office or notarized. Guarantors must sign a new Lease Contract Guaranty with each renewal.

<u>Credit History:</u> Credit accounts should have satisfactory ratings and all utility accounts must be current with no balance owing. If credit has been slow but all other qualifications for residency have been met, the application may be conditionally approved with payment of an additional security deposit.

If the bankruptcy has been dismissed or discharged, we may require further information for review but may still approve your application and/or may require additional security deposit.

<u>Criminal background:</u> Criminal background will be reviewed for all adult members of the household who have satisfactorily met all above income, credit, and rental history criteria.

- A history of any criminal conviction is not a denial of a rental application in all cases; criminal history is evaluated based on the nature and time of the conviction, as well as any relevant mitigating information provided by the applicant. Criminal history screening will not consider arrests, charges, expunged convictions, convictions reversed on appeal, offenses where adjudications was withheld or deferred, pardoned convictions, vacated convictions, and sealed juvenile records.
- Felony conviction for 1) the manufacture, sale, or distribution of a controlled substance; 2) arson; or 3) homicide will result in a denial of the application. Current registration as a sexual offender will result in automatic denial of the application.
- If the criminal history screening produces any relevant conviction, you will be given notice
  of the specific information from the screening that creates the concern and will have an
  opportunity to provide any additional information for us to consider in the evaluation of
  your application.



#### **PROPERTY SPECIFIC INFORMATION:**

<u>Maximum Occupants:</u> One Bedroom – Two (2) Persons, Two Bedroom – Four (4) Persons, Three Bedroom – Six (6) Persons, and Four Bedroom Eight (8) Persons.

Pet Policy: We allow up to two (2) pets per apartment. Dogs must be 40 lbs. or less. We do not allow breeds that are classified as aggressive, as pets including but not limited to: American Pit Bull Terrier, American Staffordshire Terrier, Staffordshire Bull Terrier, Bull Terrier, Rottweiler, Chow Chow, Great Dane, Doberman Pincher, German Shepherd, Caucasian Ovcharka Dogo Argentino, Saint Bernard, Fila Brasileiro, Perro De Presa Canario, Akita Inu, Husky, Bull Mastiff. All pets must be listed on your application and registered with the office. We also require that immunizations are up to date and a photo of your pet for the file. Additional information and requirements are available on the Animal Addendum and may be reviewed prior to moving in by request. We comply with all fair housing laws regarding Assistance Animals. No animal is permitted on the premises without prior written authorization from management.

Please refer to this community's Statement of Qualifications addendum for additional qualifying standards and fees/deposits.

I acknowledge the receipt of this screening/application criteria document:

| · ·                       | • | 0 |  |  |
|---------------------------|---|---|--|--|
|                           |   |   |  |  |
|                           |   |   |  |  |
|                           |   |   |  |  |
| <b>Applicant Signatur</b> | e |   |  |  |
| 0                         |   |   |  |  |
|                           |   |   |  |  |
| Print Name                |   |   |  |  |
|                           |   |   |  |  |
|                           |   |   |  |  |
| Date                      |   |   |  |  |
| Date                      |   |   |  |  |



# STATEMENT OF QUALIFICATIONS ADDENDUM Gallery at Fat Village June 9<sup>th,</sup> 2025

#### Fees/Deposits

- Application Fee- \$125 (may or may not be refundable (Money Order or Cashier's Check)
- Security Deposit- \$500 with Approved Credit.
- Non-Refundable Pet fee \$500 per pet/up to two (2) pets.
- Pet Rent \$25 per month per pet
- Pest Control Fee- \$5 per month
- Parking \$75.00 First Vehicle, 2<sup>nd</sup> space \$125.00 and reserved space \$200 Monthly.
- Trash Fee- \$25.00 Per month.

#### Rent Range (subject to change)

Studios 120% AMI Rent: \$1812

One Bedroom: 120% AMI Rent: \$2255.00

Two Bedrooms 120% AMI Rent: \$2891.00

#### MINIMUM ALLOWABLE COMBINED HOUSEHOLD INCOME TABLE

Studios 120% \$54,350 One Bedroom: 120%: \$67,680

Two Bedrooms: 120%: \$86,730

#### MAXIMUM ALLOWABLE COMBINED HOUSEHOLD INCOME TABLE

#### One Bedroom:

1 Person 120%: \$96,840 2 Persons 120%: \$110,640

#### Two Bedroom:

3 Persons 120%: \$124,440 4 Persons 120%: \$138,360

#### I acknowledge the receipt of this document:

| Applicant Signature:  |       |  |
|-----------------------|-------|--|
| Print Applicant Name: | Date: |  |



## RENTAL APPLICATION FOR RESIDENTS AND OCCUPANTS

(Each co-applicant and each occupant 18 years old and over must submit a separate application.)

Date when filled out:



All applicants who indicate that they are not U.S. citizens will be asked to complete the supplemental questions in this Rental Application, unless otherwise noted. We are committed to compliance with fair housing laws and do not discriminate based on race, color, religion, sex, national origin, handicap or familial status. The purpose of the supplemental questions is:

- 1. to give you the option to furnish information about an emergency contact person for you in your home country;
- 2. to verify that you are lawfully in the United States;
- 3. to determine whether your right to be in the U.S. expires during your Lease Contract term; and
- 4. to enable us to better cooperate with government officials in the performance of their duties, when requested.

We don't anticipate sharing your responses to the supplemental questions with anyone except government officials who might inquire about you.

| APPLICANT INFORMATION  |  |   |       |  |
|--|--|---|-------|--|
| Full Name (Exactly as it appears on D.   | river's License or Govt. ID card)              |   |       |  |
| Former Name (if applicable)  |  | Gender (Optional)   |       |  |
| Birthdate  | Social Security #                              | Driver's License #  | State |  |
| Government Photo ID card#  |  | Туре  |       |  |
| Home Phone Number  | Cell Phone Number                              | Work Phone Number   |       |  |
| Email Address  |  |   |       |  |
|  |  | Required" box is checked, please answer the follow<br>ollowing questions are not required and are optional. |       |  |
| Have you ever been asked or ordere   | d by a representative of any governr           | nent to leave the U.S. or any other country? D yes D no   |       |  |
| If yes, please state when and what cou   | untry or countries (list all):                 |   |       |  |
| Are you a U.S. citizen? Dyes D no  |  |   |       |  |
|  | peen in the United States? Ye                  |   |       |  |
|  |  | of which you are a citizen (list all):  |       |  |
|  |  | cument that entitles you to be in the United States:  |       |  |
|  |  | rm includes photo and fingerprint). Card Number:  |       |  |
|  |  | fingerprint). Expiration Date:Card Number:  Expiration Date:Form Number:                                    |       |  |
|  |  | ation by USCIS of your entitlement above.   |       |  |
| · ·  |  | •   |       |  |
| If you are relying on Form 1-94, we will ask to see your passport and visa, and you will need to answer the questions below.  Country issuing your passport: |  |   |       |  |
| Expiration Date:   |  |   |       |  |
|  | ves, what type? <b>D</b> student <b>D</b> work | D visitor D other (specify):  |       |  |
| Visa Expiration Date:  |  |   |       |  |
| We may ask to make a photocopy of  | fany of the USCIS documents check              | ed above and, if needed, your passport and visa.  |       |  |
| Marital Status: <b>D</b> single <b>D</b> married I am applying for the apartment loca  | •  |   |       |  |
| Is there another co-applicant? Dy  | ·  |   |       |  |
|  |  |   |       |  |
| Co-applicant Name  |  |   |       |  |
| Email  |  |   |       |  |
| Co-applicant Name  |  |   |       |  |
| Email  |  |   |       |  |
| Co-applicant Name  |  |   |       |  |
| Email  |  |   |       |  |
| Co-applicant Name  |  |   |       |  |
| Email  |  |   |       |  |
| Co-applicant Name  |  |   |       |  |
| Email  |  |   |       |  |

| OTHER OCCUPANTS   |  |  |             |
|---|--|--|-------------|
| Eull Name   |  | Dalatianahin   |             |
| Full Name   |  | Relationship   |             |
| Date of Birth   | Social Security #  | Driver's License #   | State       |
| Government Photo ID card#   |  | Туре   | -           |
|   |  | Required" box is checked, please answer the followined, the following questions are not required and are o |             |
| If yes, please state when and what couls this occupant a U.S. citizen? Dy                                   | untry or countries (list all):                           |  | <b>D</b> no |
| Place of Birth  | Country or countries of                                  | of which occupant is a citizen (list all):   |             |
|   | . , ,  | ument that entitles the occupant to be in the United States:   |             |
|   |  | m includes photo and fingerprint). Card Number:<br>ingerprint). Expiration Date: Card Number:              |             |
| <b>D</b> Form 1-94 Global Entry Form (form  | does not include photo or fingerprint). Ex               | piration Date:Form Number:   |             |
| · · ·   |  | ion by USCIS of your entitlement above.  and you will need to answer the questions below.                  |             |
|   |  | Passport Number:   |             |
| Expiration Date:  |  |  |             |
| Visa Expiration Date:   |  | work <b>D</b> visitor <b>D</b> other (specify):  |             |
| We may ask to make a photocopy o  | f any of the USCIS documents checke                      | ed above and, if needed, occupant's passport and visa.   |             |
| Full Name   |  | Relationship   |             |
| Date of Birth   | Social Security #  | Driver's License #   | State       |
| Government Photo ID card#   |  | Туре   |             |
|   |  | Required" box is checked, please answer the followied, the following questions are not required and are    |             |
| Has this occupant ever been asked   | or ordered by a representative of any                    | government to leave the U.S. or any other country? D yes   | <b>D</b> no |
| If yes, please state when and what couls this occupant a U.S. citizen? Dy                                   |  |  |             |
|   | ccupant been in the United States?                       |  |             |
|   |  | of which occupant is a citizen (list all):ument that entitles the occupant to be in the United States:     |             |
| _   | , ,  | rm includes photo and fingerprint). Card Number:   |             |
|   |  | ingerprint). Expiration Date:Card Number:  |             |
|   |  | piration Date:Form Number:   |             |
| · ·   |  | ion by USCIS of your entitlement above.  and you will need to answer the questions below.                  |             |
|   |  | Passport Number:   |             |
| Expiration Date:  Does occupant have a visa? Dyes   | D no If yes, what type? D student D                      | work <b>D</b> visitor <b>D</b> other (specify):  |             |
| Visa Expiration Date:   | <del></del>  | ed above and, if needed, occupant's passport and visa.   |             |
| We may ask to make a photocopy o  | Tany of the ocoro documents enecke                       | a above and, it needed, occupant a passport and visu.  |             |
| Full Name   |  | Relationship   |             |
| Date of Birth   | Social Security #  | Driver's License #   | State       |
| Government Photo ID card#   |  | Туре   |             |
|   |  | equired" box is checked, please answer the followined, the following questions are not required and are    |             |
| Has this occupant ever been asked If yes, please state when and what couls this occupant a U.S. citizen? Dy | untry or countries (list all):                           | government to leave the U.S. or any other country? D yes   | <b>D</b> no |
| Approximately how long has this of  | ccupant been in the United States?                       |  |             |
|   |  | of which occupant is a citizen (list all):ument that entitles the occupant to be in the United States:     |             |
|   | , ,  | m includes photo and fingerprint). Card Number:  |             |
|   |  | ngerprint). Expiration Date:Card Number:   |             |
| l _   |  | piration Date:Form Number:   |             |
| · ·   |  | ion by USCIS of your entitlement above.  and you will need to answer the questions below.                  |             |
| Country issuing passport:   |  | _Passport Number:  |             |
| Expiration Date:  | . D  | Deller Deller Deller   |             |
| Does occupant have a visa? Dyes Visa Expiration Date:   | <b>D</b> no If yes, what type? <b>D</b> student <b>D</b> | work <b>u</b> visitor <b>u</b> other (specify):  |             |
| · -   | f any of the USC/S documents checke                      | ed above and, if needed, occupant's passport and visa.   |             |

| OTHER OCCUPANTS (contin   | ued)   |   |       |  |  |
|---|--|---|-------|--|--|
| Full Name   |  | Relationship  |       |  |  |
| Tull Name   |  | Neiduonanip   |       |  |  |
| Date of Birth   | Social Security #  | Driver's License #  | State |  |  |
| Government Photo ID card#   |  | Туре  |       |  |  |
|   |  | "Required" box is checked, please answer the follow d, the following questions are not required and are o   |       |  |  |
| Has this occupant ever been asked If yes, please state when and what colls this occupant a U.S. citizen? Dy   | or ordered by a representative of any untry or countries (list all):       | government to leave the U.S. or any other country? D yes  |       |  |  |
|   |  | f which occupant is a citizen (list all):   |       |  |  |
|   | . , ,  | ment that entitles the occupant to be in the United States: m includes photo and fingerprint). Card Number: |       |  |  |
|   |  | fingerprint). Expiration Date:Card Number:xpiration Date:Form Number:                                       |       |  |  |
| · ·   | ne of the above documents, with verificat                                  | •   |       |  |  |
| ·   |  | and you will need to answer the questions below.  |       |  |  |
| Country issuing passport: Expiration Date:  |  | Passport Number:  |       |  |  |
|   | <b>D</b> no If yes, what type? <b>D</b> student <b>D</b>                   | work <b>D</b> visitor <b>D</b> other (specify):   |       |  |  |
| •   | <del></del>  | d above and, if needed, occupant's passport and visa.   |       |  |  |
| Full Name   |  | Relationship  |       |  |  |
| Date of Birth   | Social Security #  | Driver's License #  | State |  |  |
| Government Photo ID card#   |  | Туре  |       |  |  |
|   |  | "Required" box is checked, please answer the follow d, the following questions are not required and are o   |       |  |  |
| If yes, please state when and what couls this occupant a U.S. citizen? Dy Approximately how long has this or Place of Birth  Please check the U.S. Citizenship a  D Form 1-551 Permanent Resident C  D Form 1-766 Employment Authoriza  D Form 1-94 Global Entry Form (form | untry or countries (list all):   | If which occupant is a citizen (list all):  |       |  |  |
| If relying on Form 1-94, we will ask  | to see occupant's passport and visa, a                                     | nd you will need to answer the questions below Passport Number:   |       |  |  |
| Expiration Date:  |  |   |       |  |  |
| Does occupant have a visa? Dyes Visa Expiration Date:   |  | work <b>D</b> visitor <b>D</b> other (specify):   |       |  |  |
| We may ask to make a photocopy o  | f any of the USC/S documents checke  | d above and, if needed, occupant's passport and visa.   |       |  |  |
| Full Name   |  | Relationship  |       |  |  |
| Date of Birth   | Social Security #  | Driver's License #  | State |  |  |
| Government Photo ID card#   |  | Туре  |       |  |  |
|   |  | e "Required" box is checked, please answer the followed, the following questions are not required and are   |       |  |  |
| If yes, please state when and what of<br>Is this occupant a U.S. citizen? Dye<br>Approximately how long has this oc   | country or countries (list all):s  D no coupant been in the United States? | Years Months  | D no  |  |  |
|   |  | of which occupant is a citizen (list all):  |       |  |  |
| _   | . ,  | iment that entitles the occupant to be in the United States:  |       |  |  |
|   |  | m includes photo and fingerprint). Card Number:<br>fingerprint). Expiration Date:Card Number:               |       |  |  |
| <b>D</b> Form 1-94 Global Entry Form (form  | does not include photo or fingerprint). Ex                                 | xpiration Date:Form Number:   |       |  |  |
| ·   | ne of the above documents, with verificat                                  | •   |       |  |  |
| If relying on Form /-94, we will ask to see occupant's passport and visa, and you will need to answer the questions below.  Country issuing passport: Passport Number:  |  |   |       |  |  |
| Expiration Date:  | <b>D</b> no If yes, what type? <b>D</b> student <b>D</b>                   | work <b>D</b> visitor <b>D</b> other (specify):   |       |  |  |
| Visa Expiration Date:   |  |   |       |  |  |
| We may ask to make a photocopy of   | f any of the USC/S documents checke  | d above and, if needed, occupant's passport and visa.   |       |  |  |

| RESIDENCY INFORMATION   |                             |                      |   |                          |
|---|-----------------------------|----------------------|---|--------------------------|
|   |                             |                      |   |                          |
| Current Home Address (where you live now)   |                             |                      |   | Do you <b>D</b> rent or  |
| City  |                             | State                | Zip Code                                  | Down?                    |
| Dates:  |                             |                      |   |                          |
| From  | То                          |                      | Monthly Payment                           |                          |
| Apartment Name  |                             |                      |   |                          |
| Apartment Name  |                             |                      |   |                          |
| Landlord/Lender Name  |                             |                      | Phone                                     |                          |
|   |                             |                      |   |                          |
| Reason for Leaving  |                             | ,                    |   |                          |
| (The following is only applicable if at current addr  | ess for less than 6 months. | )                    |   |                          |
| Previous Home Address   |                             |                      |   |                          |
|   |                             | _                    |   | Do you D rent or         |
| City  |                             | State                | Zip Code                                  | Down?                    |
| Dates:  |                             |                      | <br>Monthly Payment                       |                          |
| From  | 10                          |                      | Monthly Payment                           |                          |
| Apartment Name  |                             |                      |   |                          |
|   |                             |                      |   |                          |
| Landlord/Lender Name  |                             |                      | Phone                                     |                          |
| Reason for Leaving  |                             |                      |   |                          |
| -   |                             |                      |   |                          |
| EMPLOYMENT INFORMATION  |                             |                      |   |                          |
|   |                             | _                    |   |                          |
| Present Employer  |                             | Address              |   |                          |
| City  |                             | <br>State            | Zip Code Work                             | Phone                    |
| Dates:  |                             | Otato                | \$  |                          |
| From  | То                          |                      | Gross Monthly Income                      |                          |
|   |                             |                      |   |                          |
| Position  |                             |                      |   |                          |
| Supervisor Name   |                             |                      | Phone                                     |                          |
| (The following is only applicable if at current emp   | lover for less than 6 month | e )                  | 1 110110                                  |                          |
| (The following to only appropriate in the same of the | 10yor 101 1000 1.1 1        | J.,                  |   |                          |
| Previous Employer   |                             | Address              |   |                          |
|   |                             |                      |   |                          |
| City  |                             | State                | Zip Code Work                             | Phone                    |
| Dates:  |                             |                      | \$ Gross Monthly Income                   |                          |
| 110111  | 10                          |                      | 0.000 monthly                             |                          |
| Position  |                             |                      |   |                          |
|   |                             |                      |   |                          |
| Supervisor Name   |                             |                      | Phone                                     |                          |
| ADDITIONAL INCOME   |                             |                      |   |                          |
| (Income must be verified to be considered)  |                             |                      |   |                          |
|   |                             |                      | \$  |                          |
| Туре  | Source                      |                      | Gross Monthly Amount                      |                          |
| Туре  | Source                      |                      |   |                          |
|   |                             |                      |   |                          |
| CREDIT HISTORY (if applicable)  |                             |                      |   |                          |
| If applicable, please explain any past credit proble  | ∍m:                         |                      |   |                          |
|   |                             |                      |   |                          |
|   |                             |                      |   |                          |
| DENTAL/ODIMINAL LIISTORY  |                             |                      |   |                          |
| RENTAL/CRIMINAL HISTORY   |                             |                      |   |                          |
| (Check only if applicable) Have you or any occupant listed in this Application  | n ever:                     |                      |   |                          |
| <b>D</b> been evicted or asked to move out?   |                             |                      |   |                          |
| D moved out of a dwelling before the end of the D declared bankruptcy?  | e lease term without the ow | ner's consent?       |   |                          |
| D declared bankruptcy? D been sued for rent?  |                             |                      |   |                          |
| D been sued for property damage?  |                             |                      |   |                          |
| been convicted (or received an alternative for violence to another person or destruction of p   |                             | lent to conviction)  | of a felony, misdemeanor involving a c    | ontrolled substance,     |
| Please indicate the year, location and type of each   |                             | ving a controlled su | ubstance, violence to another person or c | destruction of property, |
| or sex crime other than those resolved by dismissance "no" to any item not checked above.   | al or acquittal. We may nee | ed to discuss more   | facts before making a decision. You rep   | present the answer is    |
| no to any item not checked above.   |                             |                      |   |                          |
|   |                             |                      |   |                          |
|   |                             |                      |   |                          |

| REFERRAL INFORMATION   |                                    |                                |  |  |
|--|------------------------------------|--------------------------------|--|--|
| How did you find us?   |                                    |                                |  |  |
| D Online search. Website address: D Referral from a person. Name: D Social Media. Which one? D Other |                                    |                                |  |  |
| EMERGENCY CONTACT  |                                    |                                |  |  |
| Emergency contact person over 18, who will not   | be living with you:                |                                |  |  |
|  |                                    |                                |  |  |
| Name   |                                    | Relationship                   |  |  |
| Address  |                                    | City                           |  |  |
| State Zip Code   | Home Phone#                        |                                | Cell Phone#                                    |  |
| Work Phone#  | Email Address                      |                                |  |  |
| VEHICLE INFORMATION (if applicable   | )                                  |                                |  |  |
| List all vehicles owned or operated by you or any occ  | cupants (including cars, trucks, r | motorcycles, trailers, etc.).  |  |  |
|  |                                    |                                |  |  |
| Make   | Model                              |                                | Color  |  |
| Year   | License Plate #                    |                                | State  |  |
|  |                                    |                                |  |  |
| Make   | Model                              |                                | Color  |  |
| Year   | License Plate #                    |                                | State  |  |
|  |                                    |                                |  |  |
| Make   | Model                              |                                | Color  |  |
| Year   | License Plate #                    |                                | State  |  |
|  |                                    |                                |  |  |
| Make   | Model                              |                                | Color  |  |
| Year   | License Plate #                    |                                | State  |  |
| PET INFORMATION (if applicable)  |                                    |                                |  |  |
| You may not have any animal in your unit without   | management's prior authoriza       | tion in writing. If we allow y | our requested animal, you must sign a separate |  |
| animal addendum, which may require additional d  | eposits, rents, fees or other ch   | arges.                         |  |  |
| News   | Torre                              |                                | Provide  |  |
| Name   | Туре                               |                                | Breed  |  |
| Gender   | Weight                             | . D                            | Color  |  |
| Age  | Assistance Animal Status:          | Dyes <b>D</b> no               |  |  |
|  |                                    |                                |  |  |
| Name   | Туре                               |                                | Breed  |  |
| Gender   | Weight                             |                                | Color  |  |
|  | Assistance Animal Status:          | yes <b>D</b> no                |  |  |
| Age  |                                    |                                |  |  |

#### **APPLICATION AGREEMENT**

The following Application Agreement will be signed by you and all co-applicants prior to signing a Lease Contract. While some of the information below may not yet apply to your situation, there are some provisions that may become applicable prior to signing a Lease Contract. In order to continue with this application, you'll need to review the Application Agreement carefully and acknowledge that you accept its terms.

- 1. Lease Contract Information. The Lease Contract contemplated by the parties will be the current Lease Contract. Special information and conditions must be explicitly noted on the Lease Contract.
- 2. Approval When Lease Contract Is Signed in Advance. If you and all co-applicants have already signed the Lease Contract when we approve the Application, our representative will notify you (or one of you if there are co-applicants) of our approval, sign the Lease Contract, and then credit the application deposit of all applicants toward the required security deposit or other amounts owed under the Lease Contract when the Lease Contract has been signed.
- 3. Approval When Lease Contract Isn't Yet Signed. If you and all co-applicants have not signed the Lease Contract when we approve the Application, our representative will notify you (or one of you if there are co-applicants) of the approval, sign the Lease Contract when you and all co-applicants have signed, and then credit the application deposit of all applicants toward the required security deposit or other amounts owed under the Lease Contract when the Lease Contract has been signed.
- 4. If you Fail to Sign Lease Contract After Approval. Unless we authorize otherwise in writing, you and all co-applicants must sign the Lease Contract within 3 days after we give you our approval in person or by telephone or within 5 days after we mail you our approval. If you or any co-applicant fails to sign as required, we may keep the application deposit as liquidated damages, and terminate all further obligations under this Agreement.
- 5. If You Withdraw Before Approval. If you or any co-applicant withdraws an Application or notifies us that you've changed your mind about renting the dwelling unit, we'll be entitled to retain all application deposits as liquidated damages, and the parties will then have no further obligation to each other.
- 6. Approval/Non-Approval. We will notify you whether you've been approved within 10 days after the date we receive a completed Application. Your Application will be considered "disapproved" if we fail to notify you of your approval within 10 days after we have received a completed Application. Notification may be in person or by mail, or by e-mail or telephone unless you have requested that notification be by mail. You must not assume approval until you receive actual notice of approval. The 10-day time period may be changed only by separate written agreement.

#### **APPLICATION AGREEMENT (continued)**

- 7. Refund after Non-Approval. If you or any co-applicant is disapproved or deemed disapproved under Paragraph 6, we'll refund all application deposits within 30 days of such disapproval. Refund checks may be made payable to all co-applicants and mailed to one applicant.
- **8. Extension of Deadlines.** If the deadline for signing, approving, or refunding under paragraphs 4, 6, or 7 falls on a Saturday, Sunday, or a state or federal holiday, the deadline will be extended to the end of the next business day.
- 9. Keys or Access Devices. We'll furnish keys and/or access devices only after: (1) all parties have signed the Lease Contract and other rental documents; and (2) all applicable rents and security deposits have been paid in full.
- 10. Application Submission. Submission of a rental application does not guarantee approval or acceptance. It does not bind us to accept the applicant or to sign a Lease Contract.

#### **DISCLOSURES**

- 1. Application Fee (Non-Refundable). You agree to pay to our representative the non-refundable application fee in the amount indicated in paragraph 3. Payment of the application fee does not guarantee that your application will be accepted. The application fee partially defrays the cost of administrative paperwork. It is non-refundable.
- 2. Application Deposit (may or may not be refundable). In addition to any application fee(s), you agree to pay to our representative an application deposit in the amount indicated in paragraph 3. The application deposit is not a security deposit. The application deposit will be credited toward the required security deposit or other amounts owed under the Lease Contract when the Lease Contract has been signed; OR, it will be refunded under paragraph 7 of the Application Agreement if your application is not approved; OR, it will be retained by us as liquidated damages if you fail to sign or attempt to withdraw under paragraphs 4 or 5 of the Application Agreement.
- 3. Fees Due. Your Rental Application will not be processed until we receive your completed Rental Application (and the completed Rental Application of all co-applicants, if applicable) and the following fees:
  - 1. Application fee (non-refundable): \$ 125.00
  - 2. Application deposit (may or may not be refundable): \$500.00
- **4. Completed Application.** Your Rental Application for Residents and Occupants will not be considered "completed" and will not be processed until we receive the following documentation and fees:
  - 1. Your completed Rental Application;
  - 2. Completed Rental Applications for each co-applicant (if applicable);
  - 3. Application fees for all applicants;
  - 4. Application deposit for the Unit.
- **5. Notice to or from Co-Applicants**. Any notice we give you or your co-applicant is considered notice to all co-applicants; and any notice from you or your co-applicant is considered notice from all co-applicants.
- **6. SHIP Disclosure Statement.** If this property or you are a tenant who may be receiving funds from the Florida State Housing Initiatives Partnership program (SHIP), then this application is subject to the Florida's public records laws, Chapter 119, Florida Statutes. Most of the information that you provide may be required to be released if there is a public records request. If you believe that you qualify to have your information protected, you must notify us in writing of the specific law or statute that protects your information. All non-exempt information will be released in response to a public records request.

| SPECIAL PROVISIONS |
|--------------------|
|                    |
|                    |
|                    |
|                    |
|                    |
|                    |
|                    |
|                    |
|                    |
|                    |
|                    |
|                    |
|                    |
|                    |
|                    |
|                    |

#### **AUTHORIZATION AND ACKNOWLEDGMENT**

#### AUTHORIZATION

I authorize Gallery at Fat Village

(name of owner/agent) to obtain reports from any consumer or criminal record reporting agencies before, during, and after tenancy on matters relating to a lease by the above owner to me and to verify, by all available means, the information in this application, including criminal background information, income history and other information reported by employer(s) to any state employment security agency. Work history information may be used only for this Rental Application. Authority to obtain work history information expires 365 days from the date of this Application.

#### Payment Authorization

I authorize Gallery at Fat Village

(name of owner/agent) to collect payment of the application fee and application deposit in the amounts specified under paragraph 3 of the Disclosures.

#### Non-Sufficient Funds and Dishonored Payments.

If a check from an applicant is returned to us by a bank or other entity for any reason, if any credit card or debit card payment from applicant to us is rejected, or if we are unable, through no fault of our own or our bank, to successfully process any ACH debit, credit card, or debit card transaction, then:

- (i) Applicant shall pay to us the NSF Charge; and
- (ii) We reserve the right to refer the matter for criminal prosecution

| AUTHORIZATION AND ACKNOWLEDGMENT (continued)  |  |
|---|--|
| ACKNOWLEDGMENT You declare that all your statements in this Application are true and complete. You authorize us to verify question(s) or give false information, we may reject the application, retain all application fees and depot and terminate your right of occupancy. Giving false information is a serious criminal offense. In laws prevailing party may recover all attorney's fees and litigation costs from the losing party. We may at any ti and other rental housing owners regarding your performance of your legal obligations, including be compliance with the Lease Contract, the rules, and financial obligations. | sits as liquidated damages for our time and expense,<br>uits relating to the application or Lease Contract, the<br>me furnish information to consumer reporting agencies |
| Applicant's Signature Date  |  |
| FOR OFFICE USE ONLY   |  |
| Apt. name or dwelling address (street, city)  | Unit# or type  |
| Person accepting application  | Phone  |
| Person processing application  Applicant or Co-applicant was notified by <b>D</b> telephone <b>D</b> letter <b>D</b> email, or <b>D</b> in person   | Phone n of D acceptance or D non-acceptance on   |
| (Deadline for applicant and all co-applicants to sign lease is three days after notification of acceptance Name of person(s) who were notified (at least one applicant must be notified if multiple applicants):  | in person or by telephone, five days if by mail.)  |
| Name(s)   |  |
| Name of owner's representative who notified above person(s)   |  |
| ADDITIONAL COMMENTS   |  |
| -   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |





### **Application Documents Required**

Valoramos su tiempo e interés, para procesar su solicitud, traiga los siguientes documentos, según corresponda a su hogar. Todos los documentos deben estar actualizados (en los últimos 90 días) y en inglés. Si los documentos están en cualquier otro idioma, se debe obtener la verificación en ingles.

Por favor traiga los siguientes documentos al devolver la solicitud:

- Identificacion emitida por el gobierno (Licensia/Pasaporte/ID del estado)
- Tarjeta de Seguro social
- Certificado de Nacimiento para menor de edades
- 2024 1040 Taxes con IRS transcripciones

