



Date Submitted: _____
 APP Fee _____
 HOLD Fee: _____

APPLICATION FOR RESIDENCY

Please complete, sign* and return this application along with each applicant's 2 most recent paystubs and a copy of photo ID. We also require a \$35.00 non-refundable application fee *per applicant* over the age of 18 and a \$300.00 non-refundable hold/move-in fee *per apartment*. The Application fee(s) and Holding fee must be paid by 2 separate checks or money orders made out to **OUTLOOK DEVELOPMENT**. Cash and credit cards not accepted at any time.

* The application must be signed in the presence of an Outlook Development employee or notarized before being submitted.

Circle: **3 Bedrooms w/Garage** **2 Bedrooms: Upper** **Lower** **w/Garage** **w/o Garage**

Desired Move-In Date _____ List pets, if any: _____

To your knowledge has your dog or cat bitten or attacked anyone in the past. Yes No

APPLICANT OVER 18:

Last Name:		First Name:	
Social Security #:		Date of Birth:	
Home Phone:	Cell:	E-mail:	

Have you ever been charged or convicted of a crime? If yes, please explain: YES NO

RESIDENCY (Minimum 2 Years):

Current Address:	Town/State	Zip:	From:	To:
Reason for Leaving:			Own / Rent \$ _____/month	
Property Manager/Owner:			Phone:	

Previous Address:	Town/State	Zip:	From:	To:
Reason for Leaving:			Own / Rent \$ _____/month	
Property Manager/Owner:			Phone:	

Have you ever been a defendant in an unlawful detaining (eviction), lawsuit or defaulted (failed to perform) any obligation of a rental agreement or lease? If yes, please explain: _____

EMPLOYMENT (Minimum Last 2 Years):

Current Employer:		Supervisor Name/Phone #:	
Address: Town/State		Start Date:	End Date:
Position:	Gross Monthly Salary \$	Work Phone No.	

Previous Employer:		Supervisor Name/Phone #:	
Address: Town/State		Start Date:	End Date:
Position:	Gross Monthly Salary \$	Work Phone No.	

OTHER INCOME: (Verifiable only: if self-employed or retired, be prepared to provide personal tax returns, W-2's, etc.)

Source(s) _____ Amount \$ _____ Month _____

EMERGENCY CONTACT

Name:	Relationship:
Home Phone:	Address:

PLEASE LIST OTHERS OVER 18 WHO WILL BE LIVING IN THE RESIDENCE:

Name:	Phone:
Name:	Phone:
Name:	Phone:
Name:	Phone:

PLEASE LIST ANY MINORS UNDER 18 WHO WILL BE LIVING IN THE RESIDENCE:

Name:	Date of Birth:
Name:	Date of Birth:
Name:	Date of Birth:
Name:	Date of Birth:

APPLICANT'S SIGNATURE:

I/WE ACKNOWLEDGE THAT THE \$300 HOLD FEE IS NON-REFUNDABLE, UNLESS THE APPLICANT(S) ARE NOT APPROVED.

I/WE UNDERSTAND THAT THIS IS A ROUTINE APPLICATION TO ESTABLISH CREDIT, CHARACTER, EMPLOYMENT AND RENTAL HISTORY. I ALSO UNDERSTAND THAT THIS IS **NOT** AN AGREEMENT TO RENT AND THAT ALL APPLICATIONS MUST BE APPROVED. I AUTHORIZE VERIFICATION OF REFERENCES GIVEN. I DECLARE THAT THE STATEMENTS ABOVE ARE TRUE AND CORRECT, AND I AGREE THAT THE LANDLORD MAY TERMINATE MY AGREEMENT ENTERED INTO IN RELIANCE ON ANY MISSTATEMENT MADE ABOVE. I ALSO GRANT PERMISSION TO CONTACT MY EMPLOYER TO VERIFY EMPLOYMENT/ INCOME AND PERMISSION TO CONTACT MY PREVIOUS LANDLORDS TO VERIFY PAYMENT HISTORY.

APPLICANT'S SIGNATURE

DATE

By submitting this application, I am giving **Autumn Woods Community** permission to run a background check on myself and any cosigners.

*If adverse action is taken based on the consumer report, you have rights under the Fair Credit Reports Act, including the right to obtain a free copy of the report and to dispute the accuracy or completeness of any information in such report.

For Office Use Only	
Approval Status:	
Conditions:	
Rent Rate:	
Move-in Date:	
Notes:	

