

Rental Application for Residents and Occupants



Each co-applicant and each occupant 18 years old and over must submit a separate application. Spouses may submit a single application.

Date when filled out:

ABOUT YOU Full name (exactly as on driver's license or govt. ID card)	YOUR RENTAL/CRIMINAL HISTORY Check only if applicable. Have you, your spouse, or any occupant listed in this Application ever: □ been evicted or asked	
Your street address (as shown on your driver's license or government ID card):	to move out? □ moved out of a dwelling before the end of the lease term without the owner's consent? □ declared bankruptcy? □ been sued for rent? □ been sued for property damage? □ been charged, detained, or arrested for a felony, misdemeanor	
Driver's license # and state:	involving a controlled substance, violence to another person or destruction of property, or a sex crime that was resolved by conviction, probation, deferred	
OR govt. photo ID card #:	adjudication, court-ordered community supervision, or pretrial diversion?	
Former last names (maiden and married):	charged, detained, or arrested for a felony, misdemeanor involving a controlled	
Your Social Security #:	substance, violence to another person or destruction of property, or a sex crime that has not been resolved by any method? Please indicate below the year, location and	
Birthdate: Height: Weight:	type of each felony, misdemeanor involving a controlled substance, violence to	
Sex: Eye color: Hair color:	another person or destruction of property, or sex crime other than those resolved by dismissal or acquittal. We may need to discuss more facts before making a decision.	
Marital Status: ☐ single ☐ married ☐ divorced ☐ widowed ☐ separated	You represent the answer is "no" to any item not checked above.	
Are you a U.S. citizen? \square Yes \square No Do you or any occupant smoke? \square yes \square no		
Will you or any occupant have an animal? \square yes \square no		
Kind, weight, breed, age:	YOUR SPOUSE Full name:	
	Former last names (maiden and married):	
Current home address (where you now live):	Spouse's Social Security #:	
C'1	Driver's license # and state:	
City/State/Zip:	OR govt. photo ID card #:	
Home/cell phone: () Current rent: \$		
Email address:		
Name of apartment where you now live:	Sex: Eye color: Hair color:	
Current owner or manager's name:	Are you a U.S. citizen? ☐ Yes ☐ No	
Their phone: Date moved in:	Present employer:	
Why are you leaving your current residence?	Address:	
	City/State/Zip:	
	Work phone: ()	
Your previous home address:	Position:	
	Date began job: Gross monthly income is over: \$	
City/State/Zip:	Supervisor's name and phone:	
Apartment name:		
Name of above owner or manager:	OTHER OCCUPANTS Names of all persons under 18 and other adults who will	
Their phone: Previous monthly rent: \$	occupy the unit without signing the lease. Continue on separate page if more than three.	
Date you moved in: Date you moved out:	Name: Relationship:	
	Sex: DL or govt. ID card # and state:	
YOUR WORK Present employer:	Birthdate: Social Security #:	
Address:	Name: Relationship:	
City/State/Zip:	Sex: DL or govt. ID card # and state:	
Work phone: ()	Birthdate: Social Security #:	
Position:	Name: Relationship:	
Your gross monthly income is over: \$	Sex: DL or govt. ID card # and state:	
Date you began this job:	Birthdate: Social Security #:	
Supervisor's name and phone:		
	YOUR VEHICLES List all vehicles owned or operated by you, your spouse, or any occupants (including cars, trucks, motorcycles, trailers, etc.). Continue on separate page if more than three.	
Previous employer:	Make and color of vehicle:	
Address:	Year: License #: State:	
City/State/Zip:	Make and color of vehicle:	
Work phone: ()	Year: License #: State:	
Position:	Make and color of vehicle:	
Gross monthly income was over: \$	Year: License #: State:	
Dates you began and ended this job:		
Previous supervisor's name and phone:	EMERGENCY Emergency contact person over 18, who will not be living with you:	
YOUR CREDIT HISTORY Your bank's name, city, state:	Name:	
YOUR CREDIT HISTORY Your bank's name, city, state:	Address:	
	City/State/Zip:	
List major credit cards:	Work phone: () Home phone: ()	
Other non-work income you want considered. Please explain:	Relationship:	
	AUTHORIZATION I or we authorize (owner's name)	
Past credit problems you want to explain. (Use separate page.)	Stone Manor Condominiums	
WHY YOU APPLIED HERE Were you referred? ☐ Yes ☐ No.		
If yes, by whom:	to obtain reports from any consumer or criminal record reporting agencies before,	
Name of locator or rental agency:	during, and after tenancy on matters relating to a lease by the above owner to me	
Name of individual locator or agent:	and to verify, by all available means, the information in this application, including criminal background information, income history and other information reported by	
Name of friend or other person:	employer(s) to any state employment security agency. Work history information	
	may be used only for this Rental Application. Authority to obtain work history	
Did you find us on your own? ☐ Yes ☐ No If yes, fill in information below:	information expires 365 days from the date of this Application.	
☐ On the Internet ☐ Stopped by ☐ Newspaper (name):	Applicant's signature	
☐ Rental publication:	Spouse's signature	
□ Other:	Applicant must also sign on the next page of this Application.	
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Contemplated Lease Contract InformationTo be filled in only if the Lease Contract is not signed by resident(s) at time of application for rental.

The Arkansas Multi-Family Housing Association Lease Contract to be used must be the latest version published by the association unless an earlier version is initialed by resident(s) and attached to this Application. The blanks in the Lease Contract will contain the following information:

	Names of all residents who will sign Lease Contract	Prorated rent for: □ first month or □ second month \$; Monthly rental due date;	
	Name of Owner/Lessor Stone Manor Condominiums	 Late charges due if rent is not paid on or before the3; Initial late charge \$50.00; Daily late charge \$5.00; Returned-check charge \$25.00; 	
	Property name and type of dwelling (bedrooms and baths)	 (Check one): □ furnished or □ unfurnished; Utilities paid by owner (check all that apply): □ electricity, □ gas, □ water □ wastewater, ☒ trash, □ cable TV, □ master TV antenna; 	
	• Complete street address 5001 Stoney Brook Road City/State/Zip Rogers, AR 72758 ;	 You are (check one): □ required to purchase personal liability insurance on □ not required to purchase personal liability insurance; 	
	Names of all other occupants not signing Lease Contract (persons under age 18, relatives, friends, etc.)	 Agreed reletting charge \$	
	Total number of residents and occupants ; Beginning date and ending date of Lease Contract;		
	• Total security deposit \$; Animal deposit \$; • Other fees \$;		
	 Total monthly rent for dwelling unit \$; Rent to be paid at (check one) ■ on-site manager's office or □ at; 		
	Application	on Agreement	
1.	Lease Contract Information. The Lease Contract contemplated by the parties is attached or, if no Lease Contract is attached, the Lease Contract will be the current Lease Contract noted above. Special information and conditions must be explicitly noted on an attached Lease Contract or in the Contemplated Lease Contract Information above.	8. Completed Application. An Application will not be considered "completed" and will not be processed until all of the following have been provided to us (unless checked): □ a separate Application has been full filled out and signed by you and each co-applicant; □ an application fe has been paid to us; □ an application deposit has been paid to us. If n	
2.	Application Fee (nonrefundable). You have delivered to our representative an application fee in the amount indicated below, and this payment partially defrays the cost of administrative paperwork. <i>It's nonrefundable</i> .	 item is checked, all are necessary for the Application to be considered completed. Nonapproval. We will notify you whether you've been approved within 10 days after the date we receive a completed Application. You 	
3.	Application Deposit (may or may not be refundable). In addition to any application fee, you have delivered to our representative an application deposit in the amount indicated below. <i>The application deposit is not a security deposit.</i> However, it will be credited toward the required security deposit when the Lease Contract has been signed by all parties; OR it will be refunded under paragraph 10 if you are not approved; OR it will be	Application will be considered "disapproved" if we fail to notify you of your approval within 10 days after we have received a complete Application. Notification may be in person or by mail or telephone unles you have requested that notification be by mail. You must not assum approval until you receive actual notice of approval. The 10-day tim period may be changed only by separate written agreement.	
	retained by us as liquidated damages if you fail to sign or attempt to withdraw under paragraph 6 or 7.	10. Refund after Nonapproval. If you or any co-applicant is disapproved deemed disapproved under paragraph 9, we'll refund all application deposits within 30 days of such disapproval. Refund checks may be mad	
4.	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	payable to all co-applicants and mailed to one applicant. 11. Extension of Deadlines. If the deadline for signing, approving, or refunding under paragraphs 6, 9, or 10 falls on a Saturday, Sunday, or a star	
5.	application deposit of all applicants toward the required security deposit. Approval When Lease Contract Isn't Yet Signed. If you and all coapplicants have not signed the Lease Contract when we approve the Application, our representative will notify you (or one of you if there are	or federal holiday, the deadline will be extended to the end of the next day 12. 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	
	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.	you or your co-applicant is considered notice from all co-applicants. 13. Keys or Access Devices. We'll furnish keys and/or access devices onl after: (1) all parties have signed the contemplated Lease Contract and (2)	
6.	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	other rental documents referred to in the Lease Contract; and (2) a applicable rents and security deposits have been paid in full. 14. Receipt. Application fee (nonrefundable): \$	
	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.	Application deposit (may or may not be refundable): \$ Other move-in fees (may or may not be refundable): \$ Total of above application fee and application deposit: \$	
7.	If You Withdraw Before Approval. You and any co-applicant may not withdraw your application or the application deposit. 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	Total amount of money we've received to this date: \$ 15. Signature. Our representative's signature is consent only to thi Application Agreement. It does not bind us to accept applicant or to sign the proposed Lease Contract.	
me our Correp abo	knowledgment. You declare that all your statements on the first page of this ans. If you fail to answer any question or give false information, we may reject time and expense, and terminate your right of occupancy. Giving false information, the prevailing party may recover all attorney's fees and litigation cost porting agencies and other rental housing owners regarding your performance out your compliance with the Lease Contract, the rules, and financial obligation you're seriously ill or injured, what doctor may we notify? (We're not responsible for the province of	for providing medical information to or calling doctors or emergency personnel.)	
Imp	portant medical information about you in an emergency:	Doctor's Phone: ()	
	plicant's Signature:		
	gnature of Spouse:		
	gnature of Owner's Representative:	Date:	
1	FOR OFFICE USE ONLY Apt. name or dwelling address (street, city) Stone Manor Condon	T.T. ** # . *	
2	2. Person accepting application:	Phone: ()	
4	Date that applicant or co-applicant was notified by ☐ telephone, ☐ let	Phone: ()	
5	Name of person(s) who were notified (at least one applicant must be notified.		