Rental Application Approval Criteria Oberer Management Services

Welcome to our community. Before you apply to rent an apartment, please take time to review our rental application approval criteria. The following information is offered so that all applicants will have available to them a detailed statement of the rental qualifying policies. Although we have attempted to make this document easy to read and understand, by its nature as a statement of policy, it includes formal language and legal terms. If you have any questions about our policies or about the information in this document, please contact any member of our management team.

We will not discriminate against any person in the rental of an apartment because of race, color, religion, national origin, sex, age, familial status, sexual orientation or mental or physical handicap.

The term "applicant(s)" under these criteria means the persons that will be signing the Lease as a "resident". The term "occupant(s)" in these criteria means the person or persons that are authorized occupants under the Lease. All adult occupants will be considered as responsible residents under the Lease Agreement and will be asked to sign the Lease as a resident. Please also note that these are our current rental criteria; nothing contained in these requirements shall constitute a guarantee or representation by us concerning current or prior residents. Our ability to verify whether these requirements have been met is limited to the information we receive from the various consumer reporting services used.

Confidentiality: We maintain a strict policy of confidentiality and privacy for our applicants and residents. We do not discuss information on applications with anyone other than the applicant. In addition, we do not discuss individual credit reports with an applicant. If you would like to discuss or dispute anything in your credit report, you will need to contact the consumer-reporting agency that made that report. We will provide you the name and address of that consumer-reporting agency.

Application Fee: Each applicant must pay a non-refundable application fee. Because there are no exceptions, it is important that you review this information carefully before submitting an application, making certain that, to the best of your knowledge; you meet the rental application approval criteria.

Roommates/Co-Residents: In the event there are multiple applicants to reside in the same apartment, i.e. roommates or co-residents, the information on all applicants will be viewed separately during the verification process.

Occupants: Occupancy will be limited to no more than two (2) persons in efficiency, studio or one-bedroom apartment, four (4) persons in a two-bedroom apartment or six (6) in a three-bedroom apartment.

A family may occupy an apartment if the family does not exceed two (2) persons per bedroom plus a child who is less than twelve months old and who sleeps in the same bedroom with the child's parent, guardian, legal custodian, or person applying for the status. Residents who have a newborn less than twelve months old at the time of rental application or lease renewal and whose newborn will reach twelve months of age during the lease term may be required, at the time of lease renewal, to either (1) move into another available unit which has more bedrooms; or (2) move out. Rent for a larger unit will be at the rental rate at the time the Lease is entered into for the larger unit. For the purposes of this occupancy policy, a family shall consist of the following persons: One or more individuals (who have not attained the age of 18 years) being domiciled with (1) a parent or another person having legal custody of such individuals; or (2) the designee of such parent or other person having such custody, with the written permission of such parent or other person. The term "family" shall also apply to any person who is pregnant or is in the process of securing legal custody of any individual who has not attained the age of 18 years.

All occupants over the age of 18 are required to complete an application for information purposes and must pay a \$10 fee for a criminal report.

Identification Requirements: Each applicant must have a United States government issued Social Security number, Green Card, or VISA in order for the verification process to begin.

Credit History: Applicant(s) must have a credit report, which reflects a positive payment history for the past two (2) years. All bankruptcies must provide discharge papers and acceptable proof of rental history. Eviction skips, and/or money owed to a previous landlord within three (3) years will result in denial of the application. Repossessions within a 24 month period will also result in automatic denial. Foreclosures must show proof that the monthly rent of the applied apartment is lower than the monthly Principle and Interest payment on the foreclosed loan and a full deposit is required. Applicants that do not have an established credit history (more than 2 trade lines open for longer than 12 months), must provide a qualified guarantor.

Income to Debt: A verifiable consistent monthly gross income less the total monthly debt obligations shown on the credit report divided by three (3) must result in an amount which is equal to or greater than the market rental rate for the desired apartment.

Income must be verified through a direct supervisor, payroll or human resources department, or from the applicant's last thirty (30) days of paycheck stubs. Self-employed applicants will be required to provide the previous year's tax return.

Proof of retirement benefits, disability income or full-time student status is required.

Residence History: Applicant(s) must have a current resident reference (apartment community, rental property or mortgage company) reflecting a prompt payment record and an acceptable rental history for the past three (3) years. Eviction skips and/or money owed to a previous landlord within three (3) years will result in denial of the application. Foreclosures must show proof that the monthly rent of the applied apartment is lower than the monthly Principle and Interest payment on the foreclosed loan. Full deposit is required.

Any record of disturbance of neighbors, destruction of property, living or housekeeping habits at a prior residence which may adversely affect the health or welfare of other residents, illegal occupants or unauthorized pets may result in the denial of the application.

Employment: A company representative must verify applicant's employment. The applicant will be asked to provide a copy of an employment contract or written job offer from the new employer, or a copy of a pay stub.

Proof of retirement benefits, disability income or full-time student status is required.

Criminal History: All persons over the age of 18 years old that will be occupying the apartment will have a criminal search conducted. Occupant(s) who with a denied criminal search recommendation based on the below criteria will not be allowed to occupy the apartment.

Criminal background criteria:

Felony convictions involving illegal manufacture or distribution of a controlled substance will result in an automatic denial.

Felony convictions within the past seven (7) years for any other charge will result in denial of the application.

Inclusion on a National, State or Local Sex Offender List, or convictions for sexually related offenses will result in denial of the application.

Misdemeanor or gross misdemeanor convictions within the past seven (7) years involving assault, intimidation, sex related crimes, property damage, drug related property damage, or weapons charges will result in denial of the application.

Misdemeanor or gross misdemeanor convictions within the past three (3) years for any theft, dishonesty, or prostitution charges will result in denial of the application.

Please remember that this requirement does not constitute a guarantee or representation that residents or occupants residing at this apartment community have not been convicted of a felony or are not subject to deferred adjudication for a felony. There may be residents or occupants that have resided at the apartments prior to this requirement going into effect; additionally, our ability to verify this information is limited to the information made available to us by the reporting services used.

It is further the understanding of the parties that the resident or any of their guests or invitees has not been convicted of a sexually-oriented offense. In the event any individual residing in this apartment is convicted of a sexually-oriented offense or has been previously convicted of a sexually-oriented offense, they will not be permitted to remain in this apartment. Should this matter come to the attention of the apartment manager or other resident's advice the apartment manager of same, and then a thirty-day notice will be issued to the individual who is named on the lease for that apartment. The lease will be cancelled thirty days thereafter. The resident has a continuing responsibility to advise the landlord of any change in status as to the paragraph regarding Criminal History.

Validity Period: Approved applications remain in good standing for a period of ninety (90) days from the approval date. If the Lease is not signed and/or the applicant fails to occupy an apartment within the viable time period, the application must be resubmitted for verification and approval and a new application fee must be paid.

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Signature	Date	Signature	Date
Signature	Date	Agent	Date





Rental Application

Personal Information							
Applicant Name:				SSN:			
Date of birth:	М		F 🗆				
Marital Status: Married □ Divorced □ Sing	le □ Sep	arated					
Spouse Name:				SSN:			
Spouse's Date of birth:	М		F 🗆				
Current address:			City:		State:	Zip:	
Move in Date:	Status (che	ck one	e): Les	see 🗆 Gua	rantor 🗆		
Monthly payment or rent: \$	Ema	il:					
Home Phone:	Work Phon	e:			Cell Phone	e:	
Reason for Leaving:							
List all other Co-Applicants and Occupants Bel	ow (moludiii	y i cial	p	to occupants	ana occup	unio Ages.)	
Current Employment and Salary							
If not employed, please explain:							
Common Name				ccupation:			
Company Name:		City		ссирацоп.	State:	Zip:	
Employer address: Phone:		Fax:					
Supervisor:		Employed from: to					
Annual salary: \$		Employed Irom.					
		ı i a b \					
Previous Employment & Salary (if less than 1 ye	ear at currer	it Job)		-4:			
Company Name:		0::		ccupation:	01-7	7:	
Employer address:		City			State:	Zip:	
Phone:		Fax					
Supervisor: Employer			oloyed fro	om:		to	
Annual salary: \$							
Other sources of income you would like us	s to consid	er:					
Amount Soc	urce						
\$							
\$							
\$							



Spouse's Current Employment and Salary

If not employed, please explain:

Company Name:		Occupation:			
Employer address:	City	r:	State:	Zip:	
Phone:	Fax:				
Supervisor:	Emp	oloyed from:		to	
Annual salary: \$	-				
Spouse's other sources of income yo	u would like us to cor	nsider:			
Amount	Source				
\$					
\$					
\$					
Resident History (3 years required)					
Prior Address 1:	City:		State:	Zip:	
Apartment or Landlord Name:			Phone:		
Apt/Landlord Address:		City:	State:	Zip:	
Lived Here from:	to				
Reason for Leaving:					
Prior Address 2:	City:		State:	Zip:	
Apartment or Landlord Name:			Phone:		
Apartment or Landlord Address:	City	:		State:	Zip:
Lived here from:	to				
Reason for Leaving:					
Prior Address 3:	City:		State:	Zip:	
Apartment or Landlord Name:			Phone:		
Apartment or Landlord Address:	City:			State:	Zip:
Lived here from:	to				
Reason for Leaving:					
Credit History					
Has applicant ever:					
Declared Bankruptcy Yes □ No □	Been Evicted Yes	□ No □			
Refused to Pay Rent Yes No	Had a Criminal Rec	ord Yes 🗆 No			
Been Arrested for Drug Trafficking Ye	es 🗆 No 🗆				
If yes to any of these, please explain:					



General Information					
Applicant's Driver's License Number:				Driver's License State:	
Does Applicant have any pets at this time:	Yes	□ No □			
Vehicle Information					
Primary Vehicle Make/Model:			Year:	Color:	
Tag Number:			State:		
Secondary Vehicle Make/Model:			Year:	Color:	
Tag Number:			State:		
Emergency Contact					
Primary Contact Name:		Д	Address:		
Relationship:	Hom	ne Phone:		Cell Phone:	
Work Phone:		Email:			
Secondary Contact Name:		А	ddress:		
Relationship:	Hom	ne Phone:		Cell Phone:	
Work Phone:		Email:			
Doctor Name:			Doctor Phone:		
Hospital:			Hospital Phone:		
I/We hereby consent to and authorize any representative of Oberer Management Services to obtain, verify and exchange information on any reports concerning me as are maintained by, but not limited to: City, county, state, federal law enforcement agencies, credit reporting agencies, present and/or past employers and/or past residences. I understand any information obtained by Oberer Management Services will be used as a factor in decisions they make, at their sole discretion, with respect to the apartment/house for which I am applying. Furthermore, I hereby release and hold harmless agents, owners and affiliates of, but not limited to: their officers, directors, employees, agents, law enforcement agencies, credit reporting agencies, past and/or present employers, present and/or past residences, its officers and employees that shall provide information to Oberer Management Services, upon request, from and against any and all crimes, demands, suits, or expenses arising from or related to the content, validity or handling of said reports. I/We hereby certify the information contained in this application for lease is accurate, full and complete. Any discrepancy or lack of information will result in immediate rejection of this application and forfeiture of deposit listed below. I/We understand this is an application for an apartment and does not constitute a lease agreement in whole or part. I/We hereby acknowledge a Non-refundable Application Fee of \$ to be used in the processing of this application. I/We hereby acknowledge a Deposit of \$ shall be paid to be used to hold the apartment and will be processed at the time the application is submitted. If said application is denied, your deposit is refundable through the standard refund processing. Security Deposit will be forfeited if the application is cancelled by the applicant after 72 hours of application submission.					
Co-Applicant Signature			Date:		



THIS PAGE FOR OFFICE USE ONLY

Deposit of :	Received by:				Date:		
Application form received by:					Date:		
This application has been: Reason denied:	() Approved	() Denied			
Comments:							
Applicant Notified by:					Date:		

