



# Application for Residency

info@waterwaysapts.com

The undersigned applicant(s) hereby applies for and offers to execute a Lease as provided by Scott Brothers Investment Corporation or Waterways Apartments LP (hereinafter Lessor). The undersigned applicant(s) warrants that the statements contained herein are true. The purpose of this application is to assist Lessor in deciding whether to rent to applicant(s). Receipt of this application by Lessor does not obligate Lessor to deliver occupancy of any apartment.

PLEASE PRINT

Applicant Name 1	Birth Date (mm/dd/yyyy)	Social Security Number
Applicant Name 2	Birth Date (mm/dd/yyyy)	Social Security Number

Home Phone		Work Phone	
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Residential History	
Current Address	
Previous Landlord (if applicable)	
Previous Landlord (if applicable)	

<b>A</b> Current Landlord	Name	Name of Apartments	Phone	How long?
OR				
<b>B</b> Home Mortgage	Mortgagor	Address	Term	Monthly Payment

Have you ever been evicted or sued for payment of rent? Yes <input type="checkbox"/> No <input type="checkbox"/>	
If yes, indicate when such action was taken, where, by whom, for what reason, and the outcome of the action:	



Other Persons to Occupy Apartment		
Name	Relationship	Birth Date

Pet Ownership			
Do you own any pets? Yes <input type="checkbox"/> No <input type="checkbox"/>		If yes, what type(s):	Lbs:
Names of pets:	1)	2)	

Employment	
Applicant 1	Applicant 2
Present Employer:	Present Employer:
Address:	Address:
Dates of Employment:	Dates of Employment:
Position:	Position:
Supervisor's Name:	Supervisor's Name:
Phone:	Phone:
Gross Monthly Income:	Gross Monthly Income:

Vehicle Information					
Driver's License Number	State	Make	Model	Year	Color
1)					
2)					

EACH APPLICANT AGREES AND REPRESENTS THAT:

A. The actual date of possession is subject to vacation of premises by prior tenant, if any, and completion of necessary repairs or remodeling.

B. The initial payment will be due and payable upon the signing of the lease and will cover the period from the first day of the term through the remainder of that month. Thereafter all rental payments will be due and payable in advance on the **FIRST DAY** of each month.



C. A deposit of \$\_\_\_\_\_ is made herewith. If the application is approved, said deposit will be held without interest as partial or full security for the performance of the covenants of the lease and as a damage deposit. The full security deposit will be \$\_\_\_\_\_.

If the applicant(s) notifies the Lessor within 72-hours after the execution of this application that applicant(s) no longer wishes to rent an apartment, Lessor agrees to return said deposit in full. Lessor reserves the right to retain the deposit if, for any reason, prospective Lessee withdraws his application for tenancy, if said application is withdrawn after the time limit set out in the previous sentence.

D. Applicant(s) hereby authorizes Lessor to procure a “consumer report” as defined in the Fair Credit Reporting Act, 15 U.S.C. § 1681 a(d), seeking information on the credit worthiness, credit standing, credit history, credit capacity, character, general reputation, personal characteristics, or mode of living of applicant(s). Applicant(s) tenders, in addition to a security deposit, the amount of \$\_\_\_\_\_, which applicant(s) acknowledges is the cost of procuring a consumer credit report, employment verification, character references and other administrative set-up costs. This fee is non-refundable.

E. Applicant(s) is not now renting any residence in a name other than that listed above.

F. Applicant(s) agrees to sign a \_\_\_\_\_ (month, year) lease commencing \_\_\_\_\_, 20\_\_\_\_ at a rental of \$\_\_\_\_\_ monthly in the apartment unit number known as: UNIT #\_\_\_\_\_.

G. Until Lessor executes and tenders a lease to applicant(s), Lessor shall have the right to reject this applicant(s) for whatever reason.

**IN CASE OF EMERGENCY PLEASE CONTACT:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Address: \_\_\_\_\_

Referred by: \_\_\_\_\_

Special 72-hour rent quote offered by: \_\_\_\_\_ Amt.: \_\_\_\_\_ Expires: \_\_\_\_\_

**Applicant Signature(s)**

Signature 1: \_\_\_\_\_ Date: \_\_\_\_\_

Signature 2: \_\_\_\_\_ Date: \_\_\_\_\_



FOR OFFICE USE ONLY - Application Review

Employment Verification			
Name Applicant 1	Start Date	Monthly Salary	Job Title
Name Applicant 2	Start Date	Monthly Salary	Job Title

Landlord Report						
Name	Occupancy Dates	Rent Amount	Late pay?	Was proper notice given?	Is account current?	Pets?

Application Taken By: \_\_\_\_\_

Application Approved By: \_\_\_\_\_

Application Rejected By: \_\_\_\_\_

Reason: \_\_\_\_\_

Date of Lease: \_\_\_\_\_

