



Colts Run Apartment Homes - North Street Property Management, Inc.
 Unit: _____
 Rent: _____
 Move-in Date: _____

Lease Application: The most recent 2 years resident history required. Must provide dates of residency, landlord names and phone numbers for all addresses. The application cannot be submitted for processing until all information is provided.

Last Name:	First Name:	Middle/Maiden:	Suffix:
Social Security Number:	Drivers License Number:	State:	Date of Birth:
Last Name:	First Name:	Middle/Maiden:	Suffix:
Social Security Number:	Drivers License Number:	State:	Date of Birth:

Are you a US citizen? Yes No

Current Address

Street Address:	City:	State:	Zip:
Home Phone:	Alternate Phone:	Email:	
Landlord/Mortgage Name:	Phone Number:	Move-in Date:	

Previous Address 1

Street Address:	City:	State:	Zip:
Home Phone:	Alternate Phone:	Email:	
Landlord/Mortgage Name:	Phone Number:	Move-in Date:	

Previous Address 2

Street Address:	City:	State:	Zip:
Home Phone:	Alternate Phone:	Email:	
Landlord/Mortgage Name:	Phone Number:	Move-in Date:	

Employment ñ Applicant 1

Current Employer:	Phone:	Date of Hire:
Address:	Alternate Phone:	Email:
Position:	Gross Monthly Income:	Supervisor Name:

Employment ñ Applicant 2

Current Employer:	Phone:	Date of Hire:
Address:	Alternate Phone:	Email:
Position:	Gross Monthly Income:	Supervisor Name:

Total gross monthly income: _____

Vehicle Information

License Number:	State:	Year:
Make:	Model:	

Vehicle Information

License Number:	State:	Year:
Make:	Model:	

Pet Information

Type/Breed:	Weight (pounds):	Height (inches):
Type/Breed:	Weight (pounds):	Height (inches):

Other Occupants

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

Emergency Contact

Name:	Street Address:		
City:	State:	Zip:	Phone:

Renter's Insurance Do you carry renters insurance? Yes No

Carrier:	Agent Name:	Phone Number:
----------	-------------	---------------

I understand that the property's insurance coverage and insurance does not and cannot protect any personal belongings against burglary, vandalism, fire, smoke, and other perils. I also understand that by not having personal liability insurance, I may be liable to third parties and to the property owner for certain perils which are covered by renter's insurance. **IF NO INSURANCE, OWNER AND ITS REPRESENTATIVES STRONGLY RECOMMEND THAT RESIDENT SECURES INSURANCE.**

Have you, your spouse, roommate or occupant listed on this application ever been (You represent that the answer is "No" to any question left blank):

Evicted or asked to move out? _____ Sued for non-payment of rent? _____ Sued for damage to rental property? _____

Received deferred adjudication? _____ If yes, please explain year, location and type of each: _____

Have you ever been convicted of a felony? _____

North Street Property Management, Inc. and Applicant acknowledge that Applicant has paid a non-refundable processing fee of \$ **45.00** . North Street Property Management, Inc. acknowledges that Applicant has also paid a holding deposit in the amount of \$ **99.00** . If Applicant fails or refuses, for any reason, to occupy the apartment and notifies North Street Property Management, Inc. within 48 hours after signing the application of their intention not to occupy the apartment, the holding deposit will be returned. If the Applicant fails to notify North Street Property Management, Inc. of their cancellation within 48 hours of signing the application, and fails to occupy the apartment, Lessor/Owner shall be entitled to damages of \$ **99.00** as administrative costs in addition to any and all damages provided for in the Lease Contract, including but not limited to damages for lost rent due to Applicant's breach of Lease. Applicant, Owner and North Street Property Management, Inc. agree these administrative costs are a reasonable forecast of the expenses incurred as a result of Applicant's failure to occupy the apartment and in no event will be considered a penalty. All parties agree this sum is an enforceable liquidated damage amount. If the Applicant is approved, the holding deposit will be applied to the deposit upon commencement of the lease.

The facts set forth in my Application are true and complete. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigation of credit agencies or bureaus of our choice.

Resident Signature: _____ Date: _____

Resident Signature: _____ Date: _____

**For Office Use Only**

Leasing Agent: _____

Sent for approval by: _____

Date: _____

Time: _____

Approved by Property Manager: _____

Signature: _____

Date: _____