

Alton Apartments For You
112 Manor Court, Suite B, Alton, IL 62002
Phone: 618.465.8708 Email: leasing@altonrentals.com

RENTAL APPLICATION

Prefer to apply online? Go to: www.stlluxury.com/apply

COMPLETE ALL SECTIONS AND SIGN—PLEASE PRINT CLEARLY. FAILURE TO COMPLETE ALL SECTIONS CAN BE GROUNDS FOR DENIAL

Today's Date: _____ Move-in Date: _____ Lease Length: _____
Type of unit applying for: Efficiency Studio 1 bed 2 bed 3 bed Unit # _____

Name: _____ **SSN:** _____ **Date of Birth:** ____/____/____

Email: _____

Current Address: _____ City/State/Zip (C/S/Z): _____

Home Ph # () _____ Cell # () _____

Marital Status: single married separated divorced widowed Maiden Name _____

Spouse Name: _____ Phone: _____

Email: _____ DOB ____/____/____ SSN _____

Total No. of occupants (including yourself): _____ List occupants below:

Note: All non-minor occupants must individually complete an occupant application, meet eligibility requirements, and provide requested supporting documents.

Name (first/last) _____ DOB ____/____/____ SSN _____

Name (first/last) _____ DOB ____/____/____ SSN _____

Name (first/last) _____ DOB ____/____/____ SSN _____

Do you have/need a co-signer? yes no Co-signer Name: _____ Relationship: _____

Emergency Contact: _____ **Relationship** _____ **PH #** _____

RESIDENTIAL HISTORY (single/non-married applicants must fill out separate applications)

1. Landlord Name: _____ Landlord's ph# () _____

Address: _____ Apt# _____ C/S/Z: _____ Rent \$ _____

Dates rented: ____/____/____ To ____/____/____ Reason for leaving: _____

2. Previous Landlord: _____ Landlord's ph# () _____

Address: _____ Apt# _____ C/S/Z: _____ Rent \$ _____

Dates rented: ____/____/____ To ____/____/____ Reason for leaving: _____

3. Please fill in your Mother's address:

_____ Apt # _____ C/S/Z _____

4. Please fill in your Father's address: (if different from above)

_____ Apt # _____ C/S/Z _____

EMPLOYMENT/ OTHER INCOME/ FINANCIAL

1. Employer/Position: _____ From _____ To _____ Fulltime/Parttime?: _____

Address: _____ C/S/Z: _____ Ph# () _____

Monthly Income: \$ _____ Supervisor name/phone: _____

Be sure to complete the attached Employment Verification Release Form (Page 4)

2. Prvs Employer/Position: _____ From _____ To _____ Fulltime/Parttime?: _____

Address: _____ C/S/Z: _____ Ph# () _____

Monthly Income: \$ _____ Supervisor name/phone: _____

Reason for Leaving: _____

3. Other Employer/Position: _____ From _____ To _____ Fulltime/Parttime?: _____

Address: _____ C/S/Z: _____ Ph# () _____

Monthly Income: \$ _____ Supervisor name/phone: _____

4. Other Monthly Income: SSI/SSD: \$ _____ Child Support/Alimony: \$ _____ Other: \$ _____

5. Obligations per month: Car Notes \$ _____ Child Support \$ _____ Credit Cards \$ _____ Other: \$ _____

6. Bank Name: _____ Checking: ___ yes ___ no Savings: ___ yes ___ no

ADDITIONAL INFORMATION

Driver's license #: _____ State _____

Spouse's/other driver's license #: _____ State _____

Do you own recreational vehicles, motorcycles, etc? _____ Describe: _____

Do you need off-street/garage parking: ___ Yes ___ No How Many Spaces: _____

A.) license plate # _____ State _____ Make _____ Model _____ Color _____ Year _____

B.) license plate # _____ State _____ Make _____ Model _____ Color _____ Year _____

Please list a Character Reference who is not related to you:

Name _____ Relationship _____ Ph # _____

How did you hear about us? _____

GENERAL QUESTIONS (MUST ANSWER ALL QUESTIONS - refusal to answer, or providing false answers is grounds for denial)

Have you, your spouse, or any occupant listed, ever:

- 1. Been evicted or asked to leave property? yes no
- 2. Been in litigation with a landlord? yes no
- 3. Broken a rental agreement or lease contract? yes no
- 4. Been sued for non-payment or rent or damages? yes no

If yes, then list: Date _____ Landlord _____

Explain _____

- 5. Declared bankruptcy? yes no
- 6. Had any accounts placed for collection since bankruptcy or ever if bankruptcy does not apply? yes no
- 7. Had credit problems? yes no
- 8. Had a utility company placed for collection? yes no

If yes, please provide: Date _____ Explain: _____

Have you, your spouse, or any occupant listed, ever been convicted, pled guilty, or “no contest” to:

- 9. A felony, misdemeanor, or any crime? yes no
- 10. A sex crime or listed on a sex offenders list? yes no
- 11. A drug-related offense? yes no
- 12. Received deferred adjudication for a crime? yes no

If yes, please provide: Date _____ City/State _____ County _____

Name at time of conviction: _____ List convictions: _____

False statements or incomplete information will be grounds for denial of this application.

This application must be signed by all adults who will occupy the apartment before it can be considered by the landlord. Acceptance of this application, and any monies deposited here with is not binding upon Landlord until approved by Landlord. If applicant withdraws, ALL monies deposited INCLUDING SECURITY DEPOSIT shall be forfeited to the landlord. Security Deposit is only refundable at the fulfillment of the lease term. In compliance with the Fair Housing Credit Report Act this notice is to inform you that the processing of this application includes but is not limited to making inquiries deemed necessary to verify the accuracy of the information herein, including procuring consumer reports from consumer credit reporting agencies and obtaining credit information from other credit institutions. The undersigned agrees that this application and any information obtained will remain the property of Brandonview LLC and its undersigned successors. A photographic, faxed, e-mailed, etc copy of this authorization will be recognized as an original.

I hereby grant this property and Brandonview LLC the right to process this application for the purpose of obtaining a rental lease agreement with this property and subsequently in case of violation of lease agreement. Additionally, I authorize all corporations, companies and law enforcement agencies, credit bureaus, academic and financial institutions, current and previous landlords, and current and former employers to release information they may have about me, including criminal records, and release them from any liability and responsibility from doing so. **THE FEE FOR APPLICATION IS \$25.00 (\$25.00 each additional applicant or cosigner) AND IS NON-REFUNDABLE.**

Primary Applicant Printed Name

Primary Applicant Signature

Date

Spouse/Secondary Printed Name

Spouse/Secondary Applicant Signature

Date

EMPLOYMENT VERIFICATION RELEASE FORM

Top portion to be completed by applicant, lower portion by employer or employer's authorized representative

This is to authorize Brandonview LLC. (dba. Gallery Luxury Apartments/
Apartments For You) and its assigned collection agencies to verify my employment
upon receiving credit with our office.

Name of Employer

Address of Employer

Employer Phone:

Employer Fax:

Print Rental Applicant's Name

Date:

X

Signature of Rental Applicant (authorizing employer to answer below questions)

To be completed by employer or employer's authorized representative:

To whom it may concern,

This is to verify that _____ is working as
(Employee's name)

_____ since ____/____/____.
(Position/title) (Hire date)

He/She is holding a ____ permanent position ____ temporary position.

Employer's signature

Date

Print employer's (or authorized representative's) name & title

Exhibit A
CRIME FREE LEASE ADDENDUM

As part of the consideration for lease of the dwelling unit identified in the lease, Resident agrees as follows:

1. Resident and Resident's Occupants whether on or off of the property; and Resident's and Resident's Occupant's guests and invitees, are prohibited from:
 - A. Engaging in any criminal activity that constitutes a felony under the Illinois Criminal Code, including drug related criminal activity, on or off the said premises. Drug related criminal activity shall mean the illegal manufacture, sale, distribution, use, possession and possession with intent to manufacture, sell, distribute, or use an illegal or controlled substance (also as defined in Section 102 of the Controlled Substance Act [21 U.S.C. 802]).
 - B. Engaging in any act that constitutes a felony under the Illinois Criminal Code, intended to facilitate criminal activity or permitting the dwelling unit to be used for criminal activity.
 - C. Engaging in the unlawful manufacturing, selling, using, storing, keeping, or giving of an illegal or controlled substance as defined in Illinois Compiled statutes, at any locations, whether on or near the dwelling unit premises.
 - D. Engaging in any illegal activity that constitutes a felony under the Illinois Criminal Code, including, but not limited to prostitution, criminal street gang activity, threatening, or intimidating, assault, including but not limited to the unlawful discharge of a weapon, on or near the dwelling unit premises, or any breach of the lease agreement that otherwise jeopardizes the health, safety and welfare of the landlord, his agent, or other tenant, or involving imminent or actual serious property damage.
2. VIOLATION OF ANY ABOVE PROVISIONS SHALL BE A MATERIAL AND IRREPARABLE VIOLATION OF THE LEASE AND GOOD CAUSE FOR IMMEDIATE TERMINATION OF TENANCY. A single violation of any of the provisions of this addendum shall be deemed a serious, material and irreparable noncompliance. It is understood that a single violation shall be good cause for immediate termination of the lease. Proof of such a violation shall not require a criminal conviction, but shall only require a preponderance of the evidence.
3. Resident hereby authorizes property management/owner to use police generated reports against Resident for any such violation as reliable direct evidence, and/or as business records as a hearsay exemption, in all eviction hearings.
4. In case of conflict between the provisions of this addendum and any provisions of the lease, the provisions of this addendum shall govern.
5. Resident also agrees to be responsible for the actions of Resident's occupants, Resident's guests and invitees, and Resident's occupant's guests and invitees, regardless of whether Resident knew or should have known about any such actions. A guest or invitee shall be anyone who Resident or Resident's occupant gives access to or allows on the premises or in the rental unit.
6. This Lease Addendum is incorporated into the lease or renewal thereof, executed or renewed at any time between Landlord/Manager and Resident/Lessee.

Resident/Prospect Signature	Date
Resident/Prospect Signature	Date
Property Owner/Manager Signature	Date
Address of Rental Property	RP: _____