

APPLICATION FOR RESIDENCY

Date		Apt #			Sole Lease Ho	older	Multiple Lease I	Holders-see Att	acned
PERSONAL INFORMATIO	<u>N</u>								
First Name				Last Name				Suffix	
Social Security Number			Visa Number		If no SSN, are		you in the US on a Visa?		
Date of Birth			Marital Status	(optional)		Former Last N	ame (maiden/mar	ried)	
Drivers License Number						State License I	ssued in		
OCCUPANT INFORMATIO	ON - (persons u	inder 18 years of	age)			No Additional	l Occupants - Ini	tial here	
Full Name				DOB			Relationship		
Full Name				DOB			Relationship		
Full Name				DOB			Relationship		
Full Name				DOB			Relationship		
RESIDENCE INFORMATION	<u>ON</u>								
Street				City			State		Zip
Phone Number				email address					
Apt Community/Mortgage Co.	Name			Do you Rent o	r Own		Dates of Resider	ncy - From/To	
Monthly Payment		Reason for Mov	ring		Contact Name	& Phone Numb	er for Rental Veri	fication	
PREVIOUS Street				City			State		Zip
Apt Community/Mortgage Co.	Name			Did you Rent o	or Own		Dates of Resider	ncy - From/To	
Monthly Payment		Reason for Mov	ring		Contact Name	& Phone Numb	er for Rental Veri	fication	
Have you ever been evicted or Have you previously filed or an			tev?		No No	Yes Yes	Date Filed		
EMPLOYMENT INFORMA					NO	Tes	Date I fied		-
Employer as of Move In Date				Phone Number			Industry		
Street				City			State		Zip
Supervisor				Supervisor Pho	one Number		Dates of Employ	ment-From/To	
Position				Annual Income					
Additional Income Source				Additional An					
				11001001001					
PREVIOUS Employer				Phone Number			Industry		
Street				City			State		Zip
Supervisor				Supervisor Pho	one Number		Dates of Employ	yment-From/To)
Position				Annual Income	?				
PET INFORMATION	If you own pe	ets, fill in below:		By initialing h	ere, I confirm	that this househ	old is pet free:		
Number of Pets	Туре		Breed		Age	Weight	i (Color	
VEHICLE INFORMATION		Edgewood Prop	oerties cannot g	guarantee parki	ng for all vehic	les listed below.			
Make	Model		Year		Color		License Plate #		State
Make	Model		Year		Color		License Plate #		State
Make	Model		Year		Color		License Plate #		State
CONVICTION INFORMAT	TION .	No Yes Explanation:	r been convid If Yes:	_	ad Guilty or	No Contest to, What State	a Misdemeano	or or Felony?	
EMERGENCY INFORMAT	TON - (not an	occupant):							
First Name			Middle Initial			Last Name			Suffix
Street				City			State		Zip
Phone Number				Relationship			Allow Key Acce	ess - yes or no	

In connection with this Application for an apartment located hereby denosits with Edgewood Properties Inc. ("we" "us"	at Columbia Group at Hamilton Phase II, LLC, the undersigned ("you" or "your") or "our") the sum of the Reservation Fee & Application Fee as detailed below.	
RESERVATION FEE - Lease executed within seven (7) cal	,	
We will apply the Reservation Fee in accordance with the pr	ovisions set forth below. The Application Fee is a non-refundable application fee for processing this	
Application and will not be refunded to you. Upon receipt o	To the COMMUNITY LISTED ABOVE. EDGEWOOD PROPERTIES ASSUMES NOLIABILITY	
sign the Lease concurrently with your submission of this Apprisign a Lease until we advise you (in writing, in person or by tele hours after you are notified by us to accept or reject the Apartm you will have 24 hours to pay all associated deposits and you	"Lease") for the Apartment Home under the terms specified in this Application. We may require you to ication. However, if we put you on a waiting list for an Apartment Home, you will not be obligated to phone) that an Apartment Home is available, and you accept the Apartment Home. You will have 24 ent Home, which you may do in writing, in person or by telephone. If you accept the Apartment Home, a must sign a lease within the specified timeframe or your rights to lease the Apartment Home will of the Apartment Home, we will thereafter have no obligation to lease the Apartment Home to you.	
Lease (if you have not already done so). Upon your execution any, to the Common Area Amenities [Charge/Rent] that is notwithstanding this Application, and our approval, you no lone effective, the Termination Notice must be delivered by you during the state of the s	and the Reservation Fee to you in full. If we approve this Application, we will ask that you execute the n of the Lease, we will apply a portion of the Reservation Fee to the Security Deposit and the remainded due upon the execution of the Lease. If, however, you decide prior to executing the Lease that, ger wish to proceed with the Lease, you must so notify us in writing (the "Termination Notice"). To be ing regular business hours to one of our representatives at the leasing office where the Apartment Home Notice to us, in consideration for our having held the Apartment Home off the market and reserved the especified above will be Forfeited.	er, if
In all events, if you have not executed and returned the Lease was Apartment Home will no longer be reserved for you, and the	thin the time required as outlined above, we will assume that you are not interested in proceeding, the Reservation Fee will be forfeited.	
	a, we are not obligated to approve this Application or rent the Apartment Home to you. Our approval of ory report of your rental history, credit history, criminal history and other information that we deem	
separate Application for Residency, and that each such occup You authorize us, through our designated agent or employees, lease the Apartment Home to you. You understand that shou have a continuing right to review your credit and criminal information improving application methods. If you misrepresent any information on the application you was terminated.	ghteen years of age who will be occupying the Apartment Home have completed and provided to us a part of the Apartment Home will sign the Lease at the time required by us. o obtain and verify all credit and criminal information for the purpose of determining whether or not to ded you enter into the Lease for the Apartment Home, we and our designated agents and employees will mation, rental application, payment history and occupancy history for account review purposes and for will be denied. In general, if misrepresentations are found after the Lease is signed, your Lease will be ant because of their race, color, national origin, religion, gender, familial status, disability, or any or local law.	
All Terms offered must be approved by the Property Man	ager to be valid. All offers subject to credit and criminal approval. Actual rates/discounts may chan based upon credit reporting.	ige
Signature of Applicant	Date	19
Leasing Consultant	Date	
FOR OFFICE USE ONLY:		
MARKET RATE INFORMATION	APPLICANT TERMS OFFERED	
(To be completed by Leasing Consultant)	(To be completed by Property Manager)	
Unit Type		
App Fee _\$	App Fee \$	
Short Term Fee \$	Short Term Fee \$	
Furnished Fee \$	Furnished Fee \$	
Base Rent \$	Base Rent \$	
Mo Pet _\$	Mo Pet \$RECURRING CONCESSION \$	
	<u></u>	
Fire Insp or C/O \$	Fire Insp or C/O \$	
Amenity Fee \$	Amenity Fee \$	
Admin Fee \$	Admin Fee \$	

Sec Dep \$
Pet Dep \$

Date

ONE TIME CONCESSION \$

Property Manager Signature

Sec Dep \$
Pet Dep \$

Exp MI Date & Term

Preferred Employer _____