

Shaker Village Rental Communities
394 Cleveland Rd. #1E, Norwalk, OH 44857
Phone: (419) 621-8200 Fax: (419) 624-8200
Email: info@shakervillagerentals.com

RENTAL APPLICATION

Unit Type Requested _____ Date Needed _____

Screening Fee: \$50.00 (Please Note! This Fee is non-refundable)
APPLICANTS MUST BE 21 YEARS OF AGE
NON-SMOKING & NO PETS

Applicants Name: _____ **Phone:** _____
Drivers License Number: _____ Social Security Number: _____
Current Address of Applicant: _____ City: _____ State: _____ Zip: _____
Move in Date: _____ Length of Residency: _____ Monthly Housing Cost: _____
Email Address: _____

Current Landlord: _____ **Phone:** _____

Spouse's Name: _____ **Phone:** _____
Drivers License Number: _____ Social Security Number: _____

Previous Landlord: _____ **Phone:** _____
Previous Address of Applicant: _____ City: _____ State: _____ Zip: _____
Move in Date: _____ Length of Residency: _____ Monthly Housing Cost: _____

Name of Applicants Employer: _____ **Phone:** _____
Name of Supervisor: _____
Business Address: _____ City: _____ State: _____ Zip: _____
Length of Employment: _____ Position: _____ Gross Income (monthly): _____
***(Please include copies of a month's worth of paycheck stubs to verify income)**

Previous Employer: _____ **Phone:** _____
Business Address: _____ City: _____ State: _____ Zip: _____
Length of Employment: _____ Position: _____ Gross Income (monthly): _____

Spouse's Employer: _____ **Phone:** _____
Business Address: _____ City: _____ State: _____ Zip: _____
Length of Employment: _____ Position: _____ Gross Income (monthly): _____

Other Sources of Income and amounts to household members such as alimony, social security, child support, wages etc.
Member: _____ Source: _____ Gross Income: _____
Member: _____ Source: _____ Gross Income: _____
***(All sources of income must be verified by paycheck stubs, vouchers, or court orders)**

INFORMATION ON ALL THOSE WHO WILL OCCUPY THE APARTMENT **(INCLUDING APPLICANTS)**.

<u>Name</u>	<u>Relationship to Applicant</u>
_____	_____
_____	_____
_____	_____

Bank References:

Savings: Name: _____ Address: _____
Checking: Name: _____ Address: _____
Loans: Name: _____ Address: _____

Credit References:

Name: _____ Balance: _____ Payment: _____
Name: _____ Balance: _____ Payment: _____

Vehicles:

Make: _____ Model: _____ Year: _____ Color: _____ Lic.: _____
Make: _____ Model: _____ Year: _____ Color: _____ Lic.: _____

In an Emergency, Notify: _____ Phone: _____

Relationship: _____ Address: _____ City: _____ Zip: _____

Have you ever been evicted? YES/NO When: _____ Where: _____

Why are you vacating you present place of residence? _____

Rental Criteria

1. Below are our some of our guidelines for renting apartments:
 - A. Bankruptcy within the last 3 years is automatic disqualification.
 - B. Eviction within the last 4 years is automatic disqualification.
 - C. You must gross 3.5 times the monthly rent and be employed in Northern Ohio or have verifiable pension, social security, or retirement.
 - D. Good credit and background history is a necessity for approval of this application. A minimum credit score of 600 is required but does not guarantee approval. Any prior landlord collections are automatic disqualification.
 - E. We will not allow a co-signer for any of the above criteria.
 - F. If you are not a U.S. citizen, we require a copy of your passport and visa.
2. A copy of your photo ID is required after a conditional rental offer is made.

** All application approvals are at the discretion of Shaker Village Management based on the above criteria.

In signing this application, I certify that the above information is correct and complete and I authorize Shaker Village Rental Communities to make the inquiries necessary to process my application and verify above information, including obtaining a consumer report from a consumer reporting agency, which will verify my credit and criminal history. I also understand that falsified or incomplete information, a poor credit profile, or a prior conviction of a felony is sufficient grounds for rejection of my application. If any information supplied on this application is later found to be false, this is grounds for termination of tenancy.

If this application is approved, applicants will have 48 hours from time of notification of an available unit to return and make any deposits required by owner/agent. If applicants fail to make the deposits within that time, they will deemed to have refused the unit and the next application for the unit will be processed.

Applicant's Signature: _____ **Date:** _____

Spouse's Signature: _____ **Date:** _____

Please make checks payable to: Shaker Village Rental Communities

ANY APPLICATION THAT IS NOT COMPLETE CANNOT BE APPROVED

