

AMERICAN VILLAGE APARTMENTS
1241 WEST ROGER RD
TUCSON ARIZONA 85705
(520) 408-9155
americanvillageapts@yahoo.com

TODAYS DATE: _____

IMPORTANT NOTICE TO ALL APPLICANTS: Should you have any questions concerning the legality of this application or any of its components, contact your attorney. This is intended to be a legally binding agreement by and between the applicant and the owner of the premises being applied for. Failure to comply with the terms and conditions herein shall be **construed as grounds for the forfeiture of your deposit.**

Applicant's Full Name: _____ **Date of Birth:** _____

Home Phone: _____ E-MAIL Address: _____

Current Address: _____ City/State/Zip: _____

How Long There: _____ Social Security #: _____ - _____ - _____

Driver license # _____ State Issued: _____

Present landlord name & number (mandatory): _____

Previous Address: _____ City/State/Zip: _____

Previous landlord name & number (mandatory): _____

How Long There: _____ Reason for leaving: _____

Current Employer: _____ Position: _____

Monthly Income/Pay: _____ Supervisor's Name: _____

How Long: _____ Work Phone and Fax Number: _____

Employer's Address: _____

Previous Employer: _____ Position: _____

Monthly Income/Pay: _____ Supervisor's Name: _____

How Long: _____ Work Phone and Fax Number: _____

Employer's Address: _____

Other income/Source: _____ **Total Income:** _____

List Names, ages, and relationship of all persons occupying the premises:

Name	Date of Birth	Relationship	Email
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List all Vehicles, which will be parked on the premises:

Type	Year	Make	License #	State
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

of Pets: _____ **Weight(s):** _____ **Age(s):** _____ **Name(s):** _____

Why are you leaving your current address? _____

Have you, your spouse, or roommate ever been evicted or sued for non-payment of rent or damages to a property? _____ If yes, explain: _____

Have you, your spouse, or roommate ever broken a rental agreement? _____

If yes, explain: _____

Have you or any one that will be living in your apartment ever been arrested, cited, prosecuted or plead guilty to a crime? _____

If yes, explain: _____

Are you, your spouse, or roommate currently involved in a bankruptcy? _____

Do you own a fire extinguisher? _____

What types of bugs or insects have you seen at your previous residence? _____

Have you ever had bed bugs? _____ If yes, please list date(s): _____

Do you have any pets? _____ How many/what kind _____

In the event of an emergency notify: _____ Phone: _____

Relationship: _____ Address: _____

CORRECT INFORMATION

Applicant represents that all of the above statements are true and complete, and hereby authorizes verification of the above information, references and credit records. Applicant also acknowledges that false information may constitute grounds for the rejection of this application and can terminate and agreement signed. It may constitute a criminal offense under the Laws of the state and or violates the lease and will result in a no refund denial.

Application Fee of \$35.00 per person, Application Fee in the form of a Cashiers Check or Money Order (Money Gram money orders not accepted), which is NON-REFUNDABLE. NO CASH PAYMENTS WILL BE ACCEPTED. If the Applicant fails to enter into the contemplated lease prior to the move-in date the Applicant's holding fee and/or deposits shall be forfeited to the OWNER. Keys will be furnished after the lease has been signed and all monies due have been paid in full.

IMPORTANT: Payment of the first month's rent and security deposit, Fees and Additional Deposits/Fees must be in the form of a cashier's check or money order (NO CASH ACCEPTED or Money Gram money orders accepted). Personal checks will be accepted thereafter upon the discretion of the landlord.

I UNDERSTAND THAT I ACQUIRE NO RIGHTS IN THE APARTMENT UNTIL I SIGN THIS AGREEMENT AND SUBMIT A HOLDING FEE. UPON APPROVAL OF TENANCY AND THE SIGNING OF A RENTAL AGREEMENT, THIS FEE WILL BE CREDITED AGAINST MY MOVE IN COSTS. IN CONSIDERATION FOR THE LANDLORD HOLDING SAID APARTMENT, I HEREBY WAIVE ALL RIGHTS TO THE RETURN OF SAID HOLDING FEE AND ALL FEES SHALL BE RETAINED AS LIQUIDATED DAMAGES IN THE EVENT I DO NOT CHOOSE TO ENTER INTO THE LEASE AGREEMENT. Pursuant to state and federal fair credit reporting acts, this is to inform you that an investigation involving the statements made on your rental application for the above mentioned apartment community, as well as inquires regarding your character, general reputation, mode of living and personal characteristics may be initiated. American Village Apartments is authorized to investigate the credit worthiness, income and, when applicable, the employment of the parties subject to this application.

Applicant's Signature

Date

Owner's Representative

Date

Application Fee: \$ _____ Paid

Apartment holding Deposit/Fee: \$ _____ Paid

All apartment-holding Deposits/Fees will be applied toward your Deposit or First Month's Rent and are Non-Refundable.

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PRESENT/PREVIOUS EMPLOYER INFORMATION RELEASE FORM

I _____ give my permission to **AMERICAN VILLAGE APARTMENTS** to obtain employment information:

Employee Signature

PRESENT/PREVIOUS EMPLOYER - Please complete and fax back to American Village Apartments.

Company Name: _____

Date of Hire: _____

Position: _____

Date Quit/Fired: _____

What is/was their pay rate: \$ _____

Is Employee PARTIME or FULLTIME? _____

Comments:

Employer Signature

American Village Management appreciates your cooperation. Our office hours are Monday through Friday 9-5, please fax to (520) 293-8545

Thank you,

Manager

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I / We _____ give my/our permission for you to give **AMERICAN VILLAGE APARTMENTS** the following information:

Applicant Signature

Address of rental property

Present/Previous Management – Please complete and fax to American Village:

Name of Community: _____

Date of Occupancy: _____

Date vacated Apartment: _____

Are/were Resident(s) evicted/or in process of eviction? YES or NO

Did Resident(s) pay their rent on time every month? YES or NO

If no, how often were they late? _____

What was their rental rate? \$ _____

How long was their lease term? _____

Were Residents issued any notices of non-compliance? YES or NO

If so, what was the nature?

Did the Resident(s) keep their apartment clean? YES or NO

Did/will Resident(s) receive their deposit back? YES or NO

Comments:

Authorized Agent Signature

American Village Management appreciates your cooperation. We are open Monday through Friday 9-5, please return to us as soon as possible. Our fax number is (520) 293-8545. Thank You.