

Required Documentation

Please bring the following documents upon returning application:

- Identification card and or driver license.
- Social Security card.
- Marriage certificate in English (If applicable).
- Proof of income last 6 consecutive paystubs (If applicable).
- Recent Social Security letter, Disability letter, or pension letter required. (English Only)
- If self-employed; notarized letter required along with 2 years of income taxes (If applicable).
- Last 6 months checking account bank statements.
- Last savings account bank statements.

Por favor traiga los siguientes documentos al devolver la solicitud:

- Tarjeta identificación o licencia de conducir.
- Tarjeta de seguro social.
- Certificado de matrimonio (En inglés) si aplica.
- Comprobante de ingresos últimos 6 recibos de sueldo (Si aplica)
- Carta reciente de la seguridad social o pensión. (En inglés)
- Si trabaja por cuenta propia, requiere una carta notarizada y dos anos de impuestos.
- Últimos 6 estados de cuenta bancarios, cuenta de cheques.
- Ultimo estado de cuenta de ahorros.





RENTAL APPLICATION FOR RESIDENTS AND OCCUPANTS

(Each co-applicant and each occupant 18 years old and over must submit a separate application.) Date when filled out:



All applicants who indicate that they are not U.S. citizens will be asked to complete the supplemental questions in this Rental Application, unless otherwise noted. We are committed to compliance with fair housing laws and do not discriminate based on race, color, religion, sex, national origin, handicap or familial status. The purpose of the supplemental questions is:

- 1. to give you the option to furnish information about an emergency contact person for you in your home country;
- 2. to verify that you are lawfully in the United States;
- 3. to determine whether your right to be in the U.S. expires during your Lease Contract term; and
- 4. to enable us to better cooperate with government officials in the performance of their duties, when requested.

We don't anticipate sharing your responses to the supplemental questions with anyone except government officials who might inquire about you.

APPLICANT INFORMATION			
Full Name (Exactly as it appears on Driver's License or Govt. ID	card)		
Former Name (if applicable)	Gender (Optional)	
Birthdate Social Security #	Driver's License	#	State
Government Photo ID card #	Туре		
Home Phone Number Cell Phone Nu	mber	Work Phone Number	
Email Address			
Supplemental Questions ☐ Required ☒ Not Required uestions if you are not a U.S. citizen. If no box is chec			
Have you ever been asked or ordered by a representative of a	ny government to leave the U.	S. or any other country? 🔲 yes 🔲 no	
If yes, please state when and what country or countries (list all):			
Are you a U.S. citizen? yes no			
Approximately how long have you been in the United States?			
	countries of which you are a d		
Please check the U.S. Citizenship and Immigration Services (
☐ Form I-551 Permanent Resident Card [Alien Registration Rece	ipt Card] (form includes photo an	d fingerprint). Card Number:	
Form I-766 Employment Authorization Document (form includes p			
☐ Form I-94 Global Entry Form (form does not include photo or fi	ngerprint). Expiration Date:	Form Number:	
USCIS receipt for replacement of one of the above documents			
If you are relying on Form I-94, we will ask to see your passp	ort and visa, and you will need	to answer the questions below.	
Country issuing your passport:	Your Passpor	Number:	
Expiration Date:			
Do you have a visa? yes no If yes, what type? student	work visitor other (specify):	
Visa Expiration Date:			
We may ask to make a photocopy of any of the USCIS docum	ents checked above and, if nee	ded, your passport and visa.	
Marital Status: single married widowed separa	ed Do you or any oc	cupant smoke? 🗋 yes 🗋 no	
I am applying for the apartment located at:			
Is there another co-applicant? yes no			
Co-applicant Name			
Email			
Co-applicant Name			
Email			
Co-applicant Name			
Email			
Co-applicant Name			
Email			
Co-applicant Name			
Email			

OTHER OCCUPANTS			
Full Name		Relationship	
Date of Birth	Social Security #	Driver's License #	State
Government Photo ID card #		Туре	
		If the "Required" box is checked, please answer the checked, the following questions are not required a	
Has this occupant ever been as If yes, please state when and wha	sked or ordered by a representative at country or countries (list all):	of any government to leave the U.S. or any other country	
	is occupant been in the United Sta	ttes? Years Months	
Place of Birth		ntries of which occupant is a citizen (list all):	
		IS) document that entitles the occupant to be in the United	d States:
		ard] (form includes photo and fingerprint). Card Number: and fingerprint). Expiration Date: Card Number:	
		print). Expiration Date: Form Number:	
		verification by USCIS of your entitlement above.	
lf relying on Form I-94, we will a	ask to see occupant's passport and	d visa, and you will need to answer the questions below.	
Country issuing passport:		Passport Number:	
Expiration Date:			
	yes no If yes, what type? stud	dent 🗋 work 🗋 visitor 🗋 other (specify):	
Visa Expiration Date:	and a first of the USOIC description	shadadahara and Manadad annual da sasara da ad	
ve may ask to make a photoco	py or any or the OSCIS documents	checked above and, if needed, occupant's passport and	/isa.
full Name		Relationship	
Date of Birth	Social Security #	Driver's License #	State
Government Photo ID card #		Туре	
Supplemental Questions	☐ Required ☐ Not Required (If the "Required" box is checked, please answer the	following
	nip and Immigration Services (USC)	ntries of which occupant is a citizen (list all): IS) document that entitles the occupant to be in the United ard) (form includes photo and fingerprint). Card Number:	l States:
		and fingerprint). Expiration Date: Card Number:	
		orint). Expiration Date: Form Number:	
		verification by USCIS of your entitlement above.	
	isk to see occupant's passport and	d visa, and you will need to answer the questions below.	
Country issuing passport:		Passport Number:	
	yes 🔲 no If yes, what type? 🔲 stud	dent 🗌 work 🔲 visitor 🔲 other (specify):	
/isa Expiration Date: We may ask to make a photoco	py of any of the USCIS documents	checked above and, if needed, occupant's passport and v	risa.
Full Name		Relationship	
un realite			
Date of Birth	Social Security #	Driver's License #	State
Government Photo ID card #		Туре	
		If the "Required" box is checked, please answer the checked, the following questions are not required a	
	ked or ordered by a representative	of any government to leave the U.S. or any other country	
this occupant a U.S. citizen?	yes no	tes? Years Months	
lace of Birth	-	ntries of which occupant is a citizen (list all):	
lease check the U.S. Citizensh	ip and Immigration Services (USCI	IS) document that entitles the occupant to be in the United	States:
		ard] (form includes photo and fingerprint). Card Number:	
		and fingerprint), Expiration Date: Card Number:	
		print), Expiration Date:Form Number:	
		verification by USCIS of your entitlement above.	
	ask to see occupant's passport and	d visa, and you will need to answer the questions below. Passport Number:	
ixpiration Date:			
	yes 🗋 no If yes, what type? 🗋 stud	lent 🔲 work 🔲 visitor 🔲 other (specify):	
isa Expiration Date:			
No mou ook to make a photoso	ny of any of the USCIS documents	checked above and, if needed, occupant's passport and v	rica

OTHER OCCUPANTS	continued)		
Full Name		Relationship	
Date of Birth	Social Security #	Driver's License #	State
Government Photo ID card #		Туре	
Supplemental Question questions if this occupant	is Required Not Required ((If the "Required" box is checked, please answer the checked, the following questions are not required a	following nd are optional.)
Has this occupant ever been	asked or ordered by a representative what country or countries (list all):	e of any government to leave the U.S. or any other country	MANUFACTURE OF STREET
	this occupant been in the United Sta	ates?Years Months	
Place of Birth		ntries of which occupant is a citizen (list all):	
		IS) document that entitles the occupant to be in the United	States:
		ard] (form includes photo and fingerprint). Card Number: and fingerprint). Expiration Date: Card Number:	
		print). Expiration Date: Card Number:	
		n verification by USCIS of your entitlement above.	
		d visa, and you will need to answer the questions below.	
Country issuing passport:		Passport Number:	
Expiration Date: Does occupant have a visa?	—— □ ves □ no If ves, what type? □ stur	dent 🗖 work 🔲 visitor 🔲 other (specify):	
Visa Expiration Date:		and toposity,	
We may ask to make a photo	copy of any of the USCIS documents	checked above and, if needed, occupant's passport and v	isa.
Full Name		Relationship	
Date of Birth	Social Security #	Driver's License #	State
Government Photo ID card #		Туре	
Supplemental Question guestions if this occupant	s Required Not Required (If the "Required" box is checked, please answer the checked, the following questions are not required ar	following
Has this occupant ever been		e of any government to leave the U.S. or any other country	and a could had to down made over a
Is this occupant a U.S. citizer		ites? Years Months	
Place of Birth		ntries of which occupant is a citizen (list all):	
Please check the U.S. Citizen	ship and Immigration Services (USC	IS) document that entitles the occupant to be in the United	States:
☐ Form I-551 Permanent Resident	dent Card [Alien Registration Receipt Ca	ard] (form includes photo and fingerprint). Card Number:	
_		and fingerprint). Expiration Date: Card Number: _	
		print). Expiration Date: Form Number: verification by USCIS of your entitlement above.	
		d visa, and you will need to answer the questions below.	
Country issuing passport:		Passport Number:	
Expiration Date:			
Visa Expiration Date:	」yes □ no If yes, what type? □ stud	dent work visitor other (specify):	
	copy of any of the USCIS documents	checked above and, if needed, occupant's passport and vi	isa.
Full Name		Relationship	
Date of Birth	Social Security #	Driver's License #	State
Government Photo ID card #		Туре	
Supplemental Question	s Required Not Required (If the "Required" box is checked, please answer the	following
questions if this occupant	is not a U.S. citizen. If no box is	checked, the following questions are not required an	d are optional.)
If yes, please state when and was this occupant a U.S. citizer	hat country or countries (list all):	e of any government to leave the U.S. or any other country?	' yes
Place of Birth		ntries of which occupant is a citizen (list all):	
		IS) document that entitles the occupant to be in the United	States:
		ard] (form includes photo and fingerprint). Card Number:	
		and fingerprint). Expiration Date: Card Number: _	
		print), Expiration Date: Form Number:	
		verification by USCIS of your entitlement above.	
If relying on Form I-94, we will Country issuing passport:		d visa, and you will need to answer the questions below.	
Expiration Date:		Passport Number:	
	」yes □ no If yes, what type? □ stud	lent 🔲 work 🔲 visitor 🔲 other (specify):	
Visa Expiration Date:			
We may ask to make a photoe	copy of any of the USCIS documents	checked above and, if needed, occupant's passport and vi-	sa.

RESIDENCY INFORMATION				
Current Home Address (where you live no	M()			
	···,			Do you 🗖 rent or
City		State	Zip Code	own?
Dates:	То		Monthly Payment	
Apartment Name				
Landlord/Lender Name			Phone	
Reason for Leaving				
(The following is only applicable if at current	address for less than 6 n	nonths.)		
Previous Home Address				B
City		State	Zip Code	Do you ☐ rent or ☐ own?
Dates:			§	
From	То		Monthly Payment	
Apartment Name				
Landiord/Lender Name			Phone	
Reason for Leaving				
EMPLOYMENT INFORMATION				
Present Employer		Address		
City		State	Zip Code	Work Phone
Dates:	То		\$ Gross Monthly Inc.	
			Gross Monding Inc	onie
Position				
Supervisor Name			Phone	
(The following is only applicable if at current	employer for less than 6	months.)		
Previous Employer		Address		
City		State	Zip Code	Work Phone
Dates:			<u> </u>	
From	То		Gross Monthly Inco	ome
Position				
Supervisor Name			Phone	
ADDITIONAL INCOME				
(Income must be verified to be considered)				
Туре	Source		\$ Gross Monthly Amount	
Туре	Source		\$ Gross Monthly Amount	
	300106		Gross Monthly Amount	
CREDIT HISTORY (if applicable) If applicable, please explain any past credit	problem:			
RENTAL/CRIMINAL HISTORY				
(Check only if applicable)				***
Have you or any occupant listed in this Appli been evicted or asked to move out?	cation ever:			
moved out of a dwelling before the end declared bankruptcy?	of the lease term without t	the owner's consent?		
been sued for rent?				
 been sued for property damage? been convicted (or received an alternat 	ive form of adjudication e	equivalent to conviction	n) of a felony, misdemeanor involv	ing a controlled substance,
violence to another person or destructio Please indicate the year, location and type	n of property, or a sex crir	ne?		
property, or sex crime other than those resolution answer is "no" to any item not checked above	ved by dismissal or acquit	tal. We may need to d	iscuss more facts before making a	decision. You represent the

REFERRAL INFORMATION			
How did you find us?			
Online search. Website address: Referral from a person, Name: Social Media. Which one? Other			
EMERGENCY CONTACT			
Emergency contact person over 18, who will not	be living with you:		
Name		Relationship	
Address		City	
State Zip Code	Home Phone #		Cell Phone #
Work Phone #	Email Address		
VEHICLE INFORMATION (if applicable)		
List all vehicles owned or operated by you or any occ		torcycles, trailers, etc.).	
Make	Model		Color
Year	License Plate #		State
Make	Model		Color
Year	License Plate #		State
Mari			
Make	Model		Color
Year	License Plate #		State
Make	Model		Color
Year	License Plate #		State
DET INFORMATION (if applicable)		_	
PET INFORMATION (if applicable) You may not have any animal in your unit without	management's prior authorization	on in writing. If we allow a	value requirested enimal, you must sign a senseste
animal addendum, which may require additional of	deposits, rents, fees or other cha	rges.	our requested animal, you must sign a separate
Name	Туре		Breed
Gender	Weight	-	Color
Age	Assistance Animal Status: 🗖 y	es 🔲 no	
Name	Туре		Breed
Gender	Weight		Color
Age	Assistance Animal Status: y	es 🔲 no	

APPLICATION AGREEMENT

The following Application Agreement will be signed by you and all co-applicants prior to signing a Lease Contract. While some of the information below may not yet apply to your situation, there are some provisions that may become applicable prior to signing a Lease Contract. In order to continue with this application, you'll need to review the Application Agreement carefully and acknowledge that you accept its terms.

- 1. Lease Contract Information. The Lease Contract contemplated by the parties will be the current Lease Contract, Special Information and conditions must be explicitly noted on the Lease Contract.
- 2. Approval When Lease Contract Is Signed in Advance. If you and all co-applicants have already signed the Lease Contract when we approve the Application, our representative will notify you (or one of you if there are co-applicants) of our approval, sign the Lease Contract, and then credit the application deposit of all applicants toward the required security deposit or other amounts owed under the Lease Contract when the Lease Contract has been signed.
- 3. Approval When Lease Contract Isn't Yet Signed. If you and all co-applicants have not signed the Lease Contract when we approve the Application, our representative will notify you (or one of you if there are co-applicants) of the approval, sign the Lease Contract when you and all co-applicants have signed, and then credit the application deposit of all applicants toward the required security deposit or other amounts owed under the Lease Contract when the Lease Contract has been signed.
- 4. If you Fail to Sign Lease Contract After Approval. Unless we authorize otherwise in writing, you and all co-applicants must sign the Lease Contract within 3 days after we give you our approval in person or by telephone or within 5 days after we mail you our approval. If you or any co-applicant fails to sign as required, we may keep the application deposit as liquidated damages, and terminate all further obligations under this Agreement.
- 5. If You Withdraw Before Approval. If you or any co-applicant withdraws an Application or notifies us that you've changed your mind about renting the dwelling unit, we'll be entitled to retain all application deposits as liquidated damages, and the parties will then have no further obligation to each other.
- 6. Approval/Non-Approval. We will notify you whether you've been approved within 10 days after the date we receive a completed Application. Your Application will be considered "disapproved" if we fail to notify you of your approval within 10 days after we have received a completed Application. Notification may be in person or by mail, or by e-mail or telephone unless you have requested that notification be by mail. You must not assume approval until you receive actual notice of approval. The 10-day time period may be changed only by separate written agreement.

APPLICATION AGREEMENT (continued)

- 7. Refund after Non-Approval. If you or any co-applicant is disapproved or deemed disapproved under Paragraph 6, we'll refund all application deposits within 30 days of such disapproval. Refund checks may be made payable to all co-applicants and mailed to one applicant.
- 8. Extension of Deadlines. If the deadline for signing, approving, or refunding under paragraphs 4, 6, or 7 falls on a Saturday, Sunday, or a state or federal holiday, the deadline will be extended to the end of the next business day,
- 9. Keys or Access Devices. We'll furnish keys and/or access devices only after: (1) all parties have signed the Lease Contract and other rental documents; and (2) all applicable rents and security deposits have been paid in full.
- 10. Application Submission. Submission of a rental application does not guarantee approval or acceptance. It does not bind us to accept the applicant or to sign a Lease Contract.

DISCLOSURES

- 1. Application Fee (Non-Refundable). You agree to pay to our representative the non-refundable application fee in the amount indicated in paragraph 3. Payment of the application fee does not guarantee that your application will be accepted. The application fee partially defrays the cost of administrative paperwork. It is non-refundable.
- 2. Application Deposit (may or may not be refundable). In addition to any application fee(s), you agree to pay to our representative an application deposit in the amount indicated in paragraph 3. The application deposit is not a security deposit. The application deposit will be credited toward the required security deposit or other amounts owed under the Lease Contract when the Lease Contract has been signed; OR, it will be refunded under paragraph 7 of the Application Agreement if your application is not approved; OR, it will be retained by us as liquidated damages if you fail to sign or attempt to withdraw under paragraphs 4 or 5 of the Application Agreement.
- 3. Fees Due. Your Rental Application will not be processed until we receive your completed Rental Application (and the completed Rental Application of all co-applicants, if applicable) and the following fees:
 - 1. Application fee (non-refundable): \$____85.00
 - 500.00
- 4. Completed Application. Your Rental Application for Residents and Occupants will not be considered "completed" and will not be processed until we receive the following documentation and fees:
 - 1. Your completed Rental Application:
 - 2. Completed Rental Applications for each co-applicant (if applicable);
 - 3. Application fees for all applicants:
 - 4. Application deposit for the Unit.
- 5. Notice to or from Co-Applicants. Any notice we give you or your co-applicant is considered notice to all co-applicants; and any notice from you or your co-applicant is considered notice from all co-applicants.
- 6. SHIP Disclosure Statement. If this property or you are a tenant who may be receiving funds from the Florida State Housing Initiatives Partnership

may be required to be released if there is a public records request. If you believe that you qualify to have your information protected, you must notify us in writing of the specific law or statute that protects your information. All non-exempt information will be released in response to a public records request.
SPECIAL PROVISIONS
AUTHORIZATION AND ACKNOWLEDGMENT
AUTHORIZATION authorize The Gallery at River Parc, LLC
(name of owner/agent) to obtain reports from any consumer or criminal record reporting agencies before, during, and after tenancy on matters relating to a lease by the above owner to me and to verify, by all available means, the information in this application, including criminal background information, income history and other information reported by employer(s) to any state employment security agency. Work history information may be used only for this Renta Application. Authority to obtain work history information expires 365 days from the date of this Application.
Payment Authorization authorize The Gallery at River Parc, LLC
(name of owner/agent) to collect payment of the application fee and application deposit in the amounts specified under paragraph 3 of the Disclosures.
Non-Sufficient Funds and Dishonored Payments.
If a check from an applicant is returned to us by a bank or other entity for any reason, if any credit card or debit card payment from applicant to us is rejected or if we are unable, through no fault of our own or our bank, to successfully process any ACH debit, credit card, or debit card transaction, then: (i) Applicant shall pay to us the NSF Charge; and (ii) We reserve the right to refer the matter for criminal prosecution

AUTHORIZATION AND ACKNOWLEDGMENT (continued) ACKNOWLEDGMENT You declare that all your statements in this Application are true and complete. You authorize us to verify the same through any means, if you fail to answer any question(s) or give false information, we may reject the application, retain all application fees and deposits as liquidated damages for our time and expense, and terminate your right of occupancy. Giving false information is a serious criminal offense. In lawsuits relating to the application or Lease Contract, the prevailing party may recover all attorney's fees and litigation costs from the losing party. We may at any time furnish information to consumer reporting agencies and other rental housing owners regarding your performance of your legal obligations, including both favorable and unfavorable information about your compliance with the Lease Contract, the rules, and financial obligations. Applicant's Signature Date FOR OFFICE USE ONLY Unit # or type Apt. name or dwelling address (street, city) Person accepting application Phone Person processing application Phone Applicant or Co-applicant was notified by 🛄 telephone 🗀 letter 🗀 email, or 🗀 in person of 🗀 acceptance or 🗀 non-acceptance on (Deadline for applicant and all co-applicants to sign lease is three days after notification of acceptance in person or by telephone, five days if by mail.) Name of person(s) who were notified (at least one applicant must be notified if multiple applicants): Name of owner's representative who notified above person(s) **ADDITIONAL COMMENTS**

Applicant Addendum Questionnaire Applicant Name:

YES	<u>NO</u>	
•	0	 Do you have full custody of your child(ren)? (If no, obtain proof of amount of time child(ren) will be living in unit.)
		Explanation:
۰	0	 Are there any absent household members who under normal conditions would live with you? (For example, a spouse away in the military or child away in school.)
		Explanation:
o	٥	3. Do you expect any changes to your household composition in the next 12 months? Explanation:

Income Information

Income is counted for anyone 18 or older (unless legally emancipated). However, if the income is unearned income such as a grant or benefit, it is counted for all household members including minors.

Include all income anticipated for the next 12 months.

Do YOU receive OR expect to receive income from any of the following sources?

YES o	<u>NO</u> 6	4,	Employment wages or salaries? (III Company Name:	octude overtime, tips, bonuses, commiss <u>Address;</u>	ilons and payments received in cash Monthly Gross Account
			Telephone Number	Fax Number	HR Contact Name
o	0	5.	Self-employment? (Include overtime, iii	os, bonuses, commissions and payments NET Income	received in cash.)
o	o	6.	Regular pay as a member of the A	rmed Forces/Military? Gross Amount	
٥	o	7.	Unemployment benefits? Or work	man's compensation? Workman's Compensation	
0	O	8.	Public Assistance, General Relief, a (TANF)? Type of Assistance	AFDC or Temporary Assistan	ce for Needy Families
o	ø	9.	(a) Child support? (We must count court-ordered support iVe must also count support that is not a Child's Name	whether is received or not unless legal o ourt-ordered rather received directly for Payon	action has been taken to remedy. rom payor.) <u>Amount</u>
6	0		(b) Alimony? If yes, Name of Payor on (c) If support/alimony is court-ordered by		
f yes, obta paper			(c) If support/alimony is court-ordered b Explanation:	er nor accusiny received, are you takh	ng togat action to remedy?
o	O	10,	Social Security, SSI or any other pa	yments from the Social Secur Monthly Amount	ity Administration?

Yes	NO				
٥	ó	11.	Regular payments from a Vet	eran's benefit, pension, ratira	sont homelit on annuities?
			Type of Payment	Source of Benefit	Monthly Amount
0	o	12.	Regular payments from a seve	erance package? Amount	
o	۰	13,	Regular payments from any ty Source of Payment	/pe of settlement? (For example, in <u>Amount</u>	surance settlements.)
٥	o	14.	Regular gifts or payments from Source of Payment	n anyone outside of the househ <u>Monthly Amount</u>	old?
o	0	15.	Regular payments from lottery Source of Payment	winnings or inheritances? Amount	
۰	o	16.	Regular payments from rental Source of Payment	property or other types of Rea	Estate transactions?
0	o	17.	Any other income sources or ty Source of Payment	pes not listed? (Please include belor Amount	ψ
o	o	18.	Do you expect any changes to yo	our income in the next 12 mont	hs?
If you D Income as	O NOT	receiv reside	e any income from any of nt, please add your initials	the sources listed above there	and you are a Zero
			Asset Info	A SECTION	71000
include all ass MINORS.	ets held and	the income	derived from the asset. INCLUDE ALL A	SSETS HELD BY ALL HOUSEHOLD	MEMBERS INCLUDING
MINORS.					The state of the s
YES	NO		Do YOU	hold:	
0	0	19.	Checking or savings account? (C	hecking must have last 6 months avera Financial Institute	ige balance, saving current) Amount AND Juterest Rate
o	o	20.	CDs, money market accounts or <u>Type of Account</u>	treasury bills? Financial Institute	Amount
o	٥	21.	Stocks, bonds or securities? Type of Account	Company or Broker	Amount
D	0	22.	Frust Funds? Type of Account	Financial Institute	Amount
		+-			

Yes

Yes	<u>No</u>				
0	o	23.	Pensions, IRAs, Keogh or other Type of Account	retirement accounts? <u>Financial Institute</u>	Аточн
o	٥	24.	Whole life insurance policy?	Telephone Number	Amonnt
o	o	25.	Real estate, rental property, land holdings? (This includes your personal residence, mo Address of Property		
٥	o	26.	Personal property held as an inv (This includes paintings, com or stamp col, include your personal belongings such as) Item	lections, artwork, collector or show care	and antiques. This does not
o	o	27.	A safe deposit boxes? Financial Institute	Amognt	
o	0				
۰	0	28. 29.	Do you have any cash on hand? Have you or any other household		
			LESS than fair market value wit	hin the past 2 years?	away any asset(s) for
				Amount:	
	20 11	~	Explanation;		The state of the s
			Student Status I	Information:	
٥	٥	30.	Are you or anyone in your housel recent class schedule including the words " Household Member	hold a full-time student? (If yes. ; Full Time") <u>Educational Institut</u> ç	olease provide a copy of the most
		74			e: •
٥	0	31.	Are you or anyone in your house recent class schedule including the words ". Household Member	hold a part time student? (if yes. Part Tune") Financial Institute	please provide a copy of the most
		2			
			Signature (Clause	
determine my el understand that I authorize my cocupancy. I w	figibility. I use such action action is consent to ha fill provide at unred for exp	ine above inderstand may resultive manage it necessa- sediting the	ng on this information to prove my househol questions are true and complete to the best of that providing false information or making it in criminal penalties, sement verify the information contained in thirty information including source names, address process. I understand that my occupancy is a process. I understand that my occupancy is a please sign and design and des	f my knowledge. I consent to release the false statements may be grounds for deal is application addendum for purposes of passes, phone numbers, account numbers was a contingent on meeting management's re-	necessary information to al of my application. I also proving my eligibility for
Printed Nan	nę			Date	
Signature					



MARITAL & ESTRANGEMENT DECLARATION
Sworn Declaration of Marital Status and Declaration of Estrangement Addendum to the Application
Property Name: GALLERY AT RIVER PARC

Troperty Name: GALLER	CY AT RIVER PARC	
Please complete either "A", "B	", "C", "D" or "E" below as appropriate regar	ding your marital status:
I,attached a copy of my divorce decree, co	, duly state that I am currently legally se arrent legal separation agreement, or letter from	parated from my spouse and have n my attorney.
PART B:		
I.	delen and other states	
any legal action regarding my marital sta	duly state that I am currently separated from itus. I hereby state that the following condition	my spouse but have NOT taken ns apply:
	LEGAL ACTION ARE AS FOLLOWS:	
For example: restraining order, fear of retaliat	ion, incarceration, religious beliefs, or other reason	explained.
If separated but not divorced, for the a I. I am separated and estranged fi	above reason, please read and complete the rom my spouse	estrangement section below:
Full Name of Estranged Spouse:		
I further certify that I do not intend to	raconalle with	
 If reconciliation occurs, my spous 	e will not be permitted to reside with me in the abod since the beginning of the initial lease term.	ove - referenced development, unless
 If reconciliation occurs prior to ex with me in the above – referenced 	piration of the twelve – months time frame cited ab development, our entire household must re – qualify	ove, and my spouse wishes to reside vas a new household.
Please select one of the options below to	address potential child support for the nex	et 12 manthe.
I mave children with my set	parated spouse and I do not anticipate filing for	It iz months:
an and more the interiors.		
next 12 months and I have	arated spouse and I do anticipate filing for or	receiving child support in the
THE PERSON AND THE PE	attached verification of the anticipated child my separated spouse and will not be receiving	A
		any cond support.
PART C:		-
,, dul	y state that I am widow/widower	
PART D:		
, have	a never have mounted	
	e never been married.	
PART E:		
, and my spouse	will both reside in the a	bove referenced development.
EPORTING AND LEASE REQUIREMENTS	:	
will report any and all changes to my living	situation. This includes, but is not limited to, cha	nges in my income, asset sources.
RIOR approval with management.	m not allow itty spouse of any other individual to	move into my residence, without
inder penalty of perjury. I certify that the infor	mation presented in this declaration is true and acciding false representations herein constitutes and a n of a lease agreement.	urate to the best of my knowledge. ect of fraud. False, misleading or
importune of Amelianus III		
ignature of Applicant/Resident	Printed Name of Applicant/Resident	Date
gnature of Applicant/Resident	Printed Name of Applicant/Resident	Date

General Instructions:

This form is to be complete by individuals wishing to be served (applicants) and those that are currently served (tenants) in housing assisted by the Department of Housing & Urban Development. Owner & agents are required to offer the applicant/tenant the option to complete this form. This form is to be completed at initial application or at lease signing. In-Place tenants must also be offered the opportunity to complete the form as part of their next interim or annual recertification. Once the form is completed it need not be completed again unless the Head of House hold or household composition changes. There is no penalty for persons who do not complete the form. However, the owner/agent may place a note in the file stating that the applicant/tenant refused to complete the form. However, the owner/agent may place a note in the file stating that the applicant/tenant refused to complete the form. Parent/Guardians are to complete the form for children under the age of 18.

The Office of Housing as been issued permission to use this form to gather race & ethnic data in assisted housing programs. Completed documents for the entire household should be stapled together & placed in the Household's file.

		PART XI - STATI	STICA	DATA		
建筑	No. of the last		- Laboratoria	- unin		
New Households	The same of the same					
Prior Housing Information (Answer for household head	on <i>1</i>)					
Monthly rent payment						
Monthly house payment						
ZIP Code						
All Households					Additional Household Information	on
Current Employment (Answer for household head)		Primary Transportation Mode (Answer for household head)	9		A member of the household: (Check all that Apply)	
Occupation	1000	Motor vehicle			Receives Medicare benefits	
ZIP Code		Public transportation			Receives Medicald benefits	
		Other			Is a Person With a Disability	
American Indian or Alaska	Native		, . , ,			
Aslan						
Black or African American				-		
Native Hawalian or Other F	Pacific Islanda	,		-		
White						
American Indian or Alaska	Native and W	hite				
Asien and White		mit	-	_		
Black or African American a	and White			-		-
American Indian or Alaska		ack or African American		_	-	
Asian and Black or African		and or Fairball Little (Call	_	_		
Other multiple race combine			-			
Person With a Disability Major Life Activities	Function sitting,	ns such as caring for one's self, pe standing, lifting, reaching, thinking,	menç o adomic	or is rega	ubstantially limits one or more of suci orded as having such an impairment. of tasks, walking, seeing, hearing, sp reading, interacting with others, learn	
Hispanic or Latino	A perso	r of Cuben, Mexican, Piredo Rice:	n Sout	h or Can	tral American, or other Spanish cultu d in addition to "Hispanic" or "Latino."	
Not-Hispanic or Latino	w beigo	in not of Cuban, Mexican, Puerto F	Rican, S	outh or (o in addition to "Hispanic" or "Latino." Central American, or other Spanish o	ulture or origin.
American Indian	ISSOUR	204 VI 18CE.			lorth and South America (including C	•
or Alaska Native	A perso	n having origins in any of the odele	ty attec	nment, Nac of th	Contract Continues to be an action	
Aslan	A perso	If having origins in any of the black	racial		ysia. Pakistan, the Philippine Islands f Africa. Terms such as "Haitlan" or	
Black or African American Native Hewalian						140gro Carros used
or Other Pacific Islander	Tacine i	n having origins in any of the origin stands.				
White	A perso North A	n having origins in any of the origin frice.	al peop	oles of E	urope, the Middle East or	
voluntary. HUD may not collect this information is authorized by the U.S Development Technical Amendment recording the 50039 Data Requirement application interview or lease signing owner/agent to collect the needed in household's file. Parents or guardian appropriate system uperades have be	information, as. Housing Act et as of 1984, This mist to HUD. Og. In-place tens formation on all are to complete in implements.	and a complete his dyou are to required to complete this of 1937 as amended, the Housing and information is needed to be incomplit warea/separts must offer the opportunities that complete the format as part of members of the household. Complete the test for the tes	soliections form, and the latest	or information of the control of the	me for reviewing instructions, searching mation. This information is required to a isplays a currently valid OMB control in overy Act of 1983 and housing and Commandated changes to Ethnicity and Raco decided to the control of cach household to "self certim or annual recertification. This process all does stapled together for each household. Once system development funds are prethnicity data electronically to the TRAC internal together controls.	obtain benefits and subser. This must by categories for categories for ify during the will allow the ld and place in the
I/We,					, by signing below certi	fv that I/We
☐ Have provided the in						
□ Elected not to provid	le the infa	rmation listed above				
certity all information i	s true and	accurate to the best of my	y kno	wledge	е.	
esident Signature	Date	Resident Signature	Ds	ıte.	Resident Signature	Dota



STATEMENT OF QUALIFICATIONS Gallery at River Parc October 2, 2023

When you meet the application standards you will have the peace of mind of knowing that you will be joining other residents who have also met strict standards.

If your application meets all the following criteria, you will be approved. If it does not, you may be approved with conditions, which may require you to pay an additional security deposit, or obtain a guarantor (in communities where permitted). If you do not meet the requirements set forth, your application will be denied.

NOTE: We do business in accordance with the Fair Housing Act. It is illegal to discriminate against any person because of race, color, religion, sex, handicap, familial status, or national origin, and any other characteristic protect by federal, state, or local law.

APPLICATION SCREENING REQUIREMENTS

A complete application: All lines must be filled in and questions answered for the application to be processed. All applicants over the age of 18 must complete an application, and all occupants over the age of 18 must sign the lease along with the lease holder(s). Any person under the age of 18 must be listed as an occupant on the lease.

Two (2) forms of identification: We require at least one valid government-issued photo identification document (ID) for all applicants over the age of 18. If your social security card is marked VALID FOR WORK ONLY WITH DHS AUTHORIZATION and you report income, you must provide the authorization card as well. Social Security cards are required for all HOME Assisted units.

Verifiable rental history: The standard approval process requires verifiable rental history for the last four (4) years. It is your responsibility to provide necessary information that allows us to contact your past landlord(s) for this information. You must have a history of paying your rent on time, have given proper notice, have no dispossessory warrant(s) filed, and must not owe any money to your landlord. If we are unable to verify your previous landlord(s) and/or references, or if you have no rental history, we reserve the right to charge additional security deposit and/or deny your application if the other criteria set forth are not met. Verifiable for these purposes means THIRD PARTY verification from someone other than a relative. We will consider a mortgage as rental history, if it has been active within the past two (2) years. However, if the mortgage is late or in default, you will be asked to give the reason why, show documentation to support the reason, and may be required to pay additional security deposit providing the other criteria set forth are met.

Income eligibility: To become eligible for approval you must meet the monthly requirement set forth by this community which is 2.75 times the tenant paid rent per month. Income will be verified by THIRD PARTY. Some examples include employment verification, the collection of six (6) to 10 consecutive paystubs depending on program requirements, the collection of SSI, SSD, SSA confirmation letters, the collection of legal settlement and divorce agreements, any other legal paperwork reflecting income (i.e. Child Support documentation, the



collection of bank statements (when applicable), and the collection of IRA, 401K, or other asset statements). A complete list of income documentation will be provided to you by the property staff once the initial interview for application is complete.

For applicants that are reporting income from a contributor (a person who makes regular monthly contributions to the applicant), the following applies:

- 50% of income or less from contribution A notarized affidavit from the contributor (form
 to be provided by office) AND six (6) months bank statements showing the amount of the
 contribution as a deposit. If the applicant cannot provide bank statements proving the
 contribution, then the contributor must be added as a GUARANTOR for the leaseholder.
- More than 50% of income from a contribution Supply the above documentation, PLUS the contributor must become a GUARANTOR for the leaseholder and earn at least FOUR (4) times the monthly rent, have verifiable impeccable credit, and score automatic approval (no conditions). Criminal history of guarantors will be considered. Guarantors must complete a Guarantor Pre-Leasing Application and pay the applicable application fee. Guarantors must also sign a Lease Contract Guaranty which must be signed in person at our office or notarized. Guarantors must sign a new Lease Contract Guaranty with each renewal.

<u>Credit History:</u> Credit accounts should have satisfactory ratings and all utility accounts must be current with no balance owing. If credit has been slow but all other qualifications for residency have been met, the application may be conditionally approved with payment of an additional security deposit.

If the bankruptcy has been dismissed or discharged, we may require further information for review but may still approve your application and/or may require additional security deposit.

<u>Criminal background:</u> Criminal background will be reviewed for all adult members of the household who have satisfactorily met all above income, credit, and rental history criteria.

- A history of any criminal conviction is not a denial of a rental application in all cases; criminal history is evaluated based on the nature and time of the conviction, as well as any relevant mitigating information provided by the applicant. Criminal history screening will not consider arrests, charges, expunged convictions, convictions reversed on appeal, offenses where adjudications was withheld or deferred, pardoned convictions, vacated convictions, and sealed juvenile records.
- Felony conviction for 1) the manufacture, sale, or distribution of a controlled substance; 2) arson; or 3) homicide will result in a denial of the application. Current registration as a sexual offender will result in automatic denial of the application.
- If the criminal history screening produces any relevant conviction, you will be given notice
 of the specific information from the screening that creates the concern and will have an
 opportunity to provide any additional information for us to consider in the evaluation of
 your application.

PROPERTY SPECIFIC INFORMATION:

Maximum Occupants: One Bedroom – Two (2) Persons, Two Bedroom – Four (4) Persons.



Pet Policy; We allow up to two (2) pets per apartment. Dogs must be 50 lbs. or less. We do not allow breeds that are classified as aggressive, as pets including but not limited to: American Pit Bull Terrier, American Staffordshire Terrier, Staffordshire Bull Terrier, Bull Terrier, Rottweiler, Chow Chow, Great Dane, Doberman Pincher, German Shepherd, Caucasian Ovcharka, Dogo Argentino, Saint Bernard, Fila Brasileiro, Perro De Presa Canario, Akita Inu, Husky, Bull Mastiff. All pets must be listed on your application and registered with the office. We also require that immunizations are up to date and a photo of your pet for the file. Additional information and requirements are available on the Animal Addendum and may be reviewed prior to moving in by request. We comply with all fair housing laws regarding Assistance Animals. No animal is permitted on the premises without prior written authorization from management.

Please refer to this community's Statement of Qualifications addendum for additional qualifying standards and fees/deposits.

acknowledge the receipt of this scree	ening/application criteria document:
Applicant Signature	
Print Name	
Date	





STATEMENT OF QUALIFICATIONS ADDENDUM Gallery at River Parc October 02, 2023

Fees/Deposits

- Application Fee \$85 per adult over the age of 18
- Application Deposit equal to \$250 (may or may not be refundable)
- Security Deposit -\$500 standard deposit, \$1000 approved with conditions.
 Application deposit will be applied to the approved deposit balance.
- Pet fee \$350 per pet (no-refundable)
- Pet Rent \$30 per month per pet

Rent Range (subject to change)

- 0 Bedroom 80% Rent starting from: \$1,377 0 Bedroom 140% Rent starting from: \$1,650 1 Bedroom 50% Rent starting from: \$887 1 Bedroom 80% Rent starting from: \$1,468 1 Bedroom 140% Rent starting from: \$1,980 2 Bedroom 50% Rent starting from: \$1,042
- 2 Bedroom 50% Rent starting from: \$1,042 2 Bedroom 80% Rent starting from: \$1,739
- 2 Bedroom 140% Rent starting from: \$2,530

MINIMUM ALLOWABLE COMBINED HOUSEHOLD INCOME TABLE

- 0 Bedroom 80%: \$45,441 0 Bedroom 140%: \$54,450 1 Bedroom 50%: \$29,271 1 Bedroom 80%: \$48,444 1 Bedroom 140%: \$65,340
- 2 Bedroom 50%: \$34,386 2 Bedroom 80%: \$57,387
- 2 Bedroom 140%: \$83,490

MAXIMUM ALLOWABLE COMBINED HOUSEHOLD INCOME TABLE

 1 Person
 50%
 \$36,150
 1 Person
 80%
 \$57,840
 1 Person
 140%
 \$101,220

 2 Persons
 50%
 \$41,300
 2 Persons
 80%
 \$66,080
 2 Persons
 2 Persons
 \$115.640

 3 Persons
 50%
 \$46,450
 3 Persons
 80%
 \$74,320
 3 Persons
 140%
 \$130,060

 4 Persons
 50%
 \$51,600
 4 Persons
 882,560
 4 Persons
 4 Persons

I acknowledge the receipt of this document:

Applicant Signature:	
Print Applicant Name:	
Today's Date:	

