

## Preliminary Application for 40 & 50 Givens Gerber Park

No Application Fees are required for 40 and 50 Givens Gerber Park



Applicants must contact Givens Gerber Park in writing, if household information changes (i.e. address, phone numbers, number of household members, criminal history, income, etc.).

We are an equal housing opportunity provider. We do not discriminate on the basis of race, color, sex (including gender identity and sexual orientation), national origin, religion, disability or familial status, or any other legally protected characteristic. We do not interfere, threaten, or coerce persons in the exercise of their fair housing rights. We do not retaliate against persons who have asserted their rights or persons who have assisted someone in asserting their rights.



# **Preliminary Rental Application**

Applicant: Name:					
Current Address:					
					::
Date of Birth:		_			
Home Phone:		_Work Pho	one:		Bedroom Size Requested:
Marital Status: sin	ngle ma	rried	_divorced	separated	widow
<u>Co-Applicant:</u> Name:					
Current Address:					
City, State, Zip Code:					
Home Phone:	]	Date of Birt	h:		
Marital Status: sin	ngle ma	rried	divorced	separated	widow

## HOUSEHOLD COMPOSITION AND CHARACTERISTICS

1. List the Head of Household and all other members who will be living in the unit. Give the Relations of each family member to the head.

Name	Relationship	Birth Date	Age	Sex	S	tuder	nt
			_			ele wh	
					2	pplies	<u>s</u>
	Head of Household				NO	FT	PT
					NO	FT	PT
					NO	FT	PT
					NO	FT	PT
					NO	FT	PT
					NO	FT	PT
					NO	FT	PT
Do you expect a change in you	ur household compos	sition within t	he nevt	12 mont	he? V	les	N

2. Do you expect a change in your household composition within the next 12 months? Yes No If yes, please explain: \_\_\_\_\_

## **STUDENT STATUS:**

Are all of the residents full time students?	[ ] Yes [ ] No
If yes: is the household comprised of a single parent and child, neither of whe	o is dependent on a third party.
	[ ] Yes [ ] No
If yes: is Applicant & Co-Applicant married and file a joint tax Return?	[ ] Yes [ ] No
If yes: does the household receive AFDC or TANF?	[ ] Yes [ ] No
If yes: is head of household in federal or state job training program?	[ ] Yes [ ] No



## **INCOME INFORMATION**

Please answer each of the following questions.	For each "yes," provide details in the charts below.
Does any member of your household:	

1.	Work Full time, part time, or seasonally (including Gig Income)
2.	Work for someone who pays him or her cash
3.	Expect a leave of absence from work due to lay off medical, maternity, or military leave[]Yes []No
4.	Now receive or expect to receive unemployment benefits
	Now receive or expect to receive child support
6.	Entitled to child support that he/she is not now receiving
7.	Now receive or expect to receive alimony
8.	Have an alimony entitlement that is not currently being received[]Yes []No\$
9.	Now receive or expect to receive public assistance (TANF)
10.	Now receive or expect to receive Social Security or disability
11.	Now receive or expect to receive income from a pension/annuity[]Yes []No\$
12.	Now receive or expect to receive regular contributions from
	organizations or individuals not living in the unit
13.	Receive income/dividends from assets including checking, savings,
	certificates of deposit, stocks, bonds, rental property
14.	Own real estate or any asset for which you receive income
15.	Now receive military pay
16.	Now receive veterans administration benefits
17.	Do you have income from any source not mentioned above
	If yes, please explain:

# Employment: Applicant:

Circle all applicable:	Employed full time	<b>Employed part time</b>	Self – employed
	Non-employed		Unemployed
Current Employer:	I	osition:	Date Hired:
Address:	Superviso	r:	Phone:
Current Wages: \$	per: hour weel	month year (circle of	ne)
Do you expect to earr	n substantial overtime? () Yes () N	o If so, how much?	

## **Co-Applicant:**

Circle all applicable:	Employed full time	Employed pa	art time	Self – employed
	Non-	employed	Unemp	loyed
Current Employer:		Position:		Date Hired:
Address:		Supervisor:	Phone:	
Current Wages: \$	per	: hour week month year	(circle one)Do	you expect to earn substantial
overtime? () Yes () I	No If so, how much?			



## **ASSET INFORMATION**

Please answer each of the following questions.

Do any household members have any of the following? If yes, indicate the value.
Checking Account
Savings Account
Certificates of Deposit
Government Benefits Card
Mobile Payment Services (Venmo/PayPal/Chime/Cash App) []Yes [] No \$
Stocks/Bonds/Mutual Funds
Trust Accounts
Whole or Universal Life Insurance (not Term)
Personal Property held as an investment
Real Estate
Annuities
Cryptocurrency / Bitcoin []Yes [] No \$
GoFundMe / Crowdsourcing
Any Assets not listed above
Have you disposed of any assets in the previous 24 months for
less than fair market value?

List all information for any asset noted above (including Checking, Savings, IRAs, Keogh accounts, and Certificates of Deposit) of all household members.

BANK NAME or INSTITUTION	TYPE OF ACCOUNT	BALANCE

### PREVIOUS RENTAL HISTORY

Name and Address of Your <u>Present</u> Landlord:	Do you: $\Box$ Rent $\Box$ Own $\Box$ Other
	Telephone No
	How Long Have You Lived There?
	Reason for Leaving.
Name and address of your Former Landlord:	
	Telephone No
	How Long Did You Live There?
	Reason for Leaving.



#### **OTHER INFORMATION:**

ADDIT	TIONAL QUESTIONS:					
1.	Have you or any household member filed fo					
2.	Have you or any household member been evicted from Tenancy?					
3.	Have you or any household member been ev	victed from Federally Funded Hou	sing for a lease			
	violation including drug use or a crime?		[]Yes[]	] No		
	If yes, explain: Have you or any household member been co					
4.	Have you or any household member been co	onvicted of a Felony or Misdemea	nor? [ ] Yes [ ]	] No		
	If yes, explain:					
5.	Are you or any household member subject to	o lifetime sex offender registration	1[]Yes[]	] No		
6.	Are you or any household member enlisted	in the U.S. Military or a veteran	[]Yes[	] No		
7.	Are you or any household member currently	receiving housing assistance fror	n HUD or a PHA[] Yes []	] No		
8.	Do you or any household member have any	special housing needs?	[]Yes[]	] No		
	If yes, explain:					
9.	If yes, explain: Do you have any relatives that work for Giv	ens Communities?	[]Yes[]	] No		
10.	Will you be bringing a pet?		[]Yes[]	] No		
	If yes, what type?					
Emerge	ency Contact:					
U	Name	Phone	Relationship			
Nearest	t Living Relative:					
	Name	Phone	Relationship			
	ETING INFORMATION:					

I hereby apply to lease the above described premises on substantially the terms set forth herein. As an inducement to Givens Gerber Park and/or Givens Communities, Agent for the owner of the property, to accept this application, I warrant that all statements contained herein are true. I have been advised and understand that residency at this community entails certain income restrictions and that residency is subject to qualification. I hereby authorize Landlord to procure a consumer report as defined in the Fair Credit Reporting Act, 15 U.S.C. 1881 a (d) seeking information on the credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living. I tender in addition to any security deposit, the amount of §\_\_\_\_\_\_ which I acknowledge is the cost of procuring a consumer credit report, employment verification, character references and other administrative set-up costs. This fee is non-refundable. I agree that in addition to execution of a Lease Agreement that I will execute a tenant certification attesting to the information contained herein which certification will be made under the penalty of perjury.

A deposit of \$\_\_\_\_\_\_\_ is made herein. If the application is approved, said deposit will be held as (partial/full) security for the performance of the covenants of the lease and as a damage deposit. The full security deposit will be \$\_\_\_\_\_\_\_. By execution of this application, I hereby authorize Givens Gerber Park and/or Givens Communities to make such investigations into my credit history as they may deem appropriate. I understand that such investigations typically include (but are not limited to) verification of employment and salary, rental history and consumer credit reports. By signing below, the applicant gives permission to procure a criminal background check and understands the results of such background check could affect the approval of this application. The undersigned do hereby acknowledge disclosure that the licensee, Givens Gerber Park and/or Givens Communities represents the Landlord in a real estate transaction.

#### **RESIDENT'S DUTY TO PROVIDE TRUTHFUL & COMPLETE INFORMATION**

# WARNING: Section 1001 of Title 18 U.S. Code makes it a criminal offense to willfully falsify a material fact or make a false statement in any matter within the jurisdiction of a federal agency.

Resident acknowledges that federal law and the IRS require Resident to answer all questions about income and student status truthfully and completely at Resident's initial certification and at each annual recertification. This information is essential for determining Resident's eligibility to occupy the Unit. Resident understands that (s) he must give truthful and complete income and student status information at all times. Resident understands that compliance with this paragraph is a condition of Resident's occupancy of the Unit. If Owner discovers, at any time the Lease Term, that Resident purposely gave false or incomplete income or student status information, Owner may evict Resident from the Unit. **Resident's Acknowledgement:** 

	(Initial here)		
Applicant:		Date:	
Co-Applicant:		Date:	
Received by:	Date Received:	Time :	
			, _