

### Schedule C

## **Smith Properties Management, Inc.**

1312 North Oak Street/801 Pecan Street

Oak Street (985)419-0687 or (985)419-0689 fax Pecan Street (985) <u>542-4760</u> office (985) 542-1904 fax





ALL
PERSONS
UNDER
THE AGE
OF 25
MUST
HAVE A
COSIGNER

# Application for Rental

Welcome to Smith Properties. We would like to make your application and leasing process go as smoothly as possible. Here is a list of everything we need to approve your application and start your lease. The list of what we need is as follows:

- ✓ A current copy of your Southeastern Student ID (when applicable)
- ✓ A current copy of your driver's license or State issued ID.
- ✓ A copy of your co-signers driver's license.
- ✓ \$20.00 Application Fee per person (non-refundable)
- ✓ Security deposit
- ✓ Auto draft form with voided check
- ✓ Voided check for your auto-draft.
- ✓ \$500 Non-Refundable Pet Fee(when applicable)
- ✓ All applicants or co-signers must have a minimum 650 credit score.

All initial leases will be for a term of 1 year. (Expiration dates will be either 12/31 or 05/31.)
We hope your stay here with Smith Properties is a good experience and we will enjoy having you.

Thank you for choosing Smith Properties,

**Smith Properties Management, Inc.** 



#### **APPLICATION FOR RENTAL**

This information is sought to assure the most responsible residents possible and to assist the management in case of emergencies. This applicant must represent that all the below statements are true and complete, and the applicant hereby authorizes verification of the below information, references, and credit records. The applicant acknowledges that false information herein may constitute grounds for rejection of this Application, termination of right to occupancy, and or forfeiture of deposits and may constitute a criminal offense under the laws of this state. Your cooperation is appreciated.

Applicant's Name:	Phone #: (	)	Age:	Sex:
Permanent Physical Address:				
Zip:				
Landlord or Apartment Manager:			ong:	
Marital Status (circle one): Single Married	Divorced Wido	wed Separated		
Social Security Number:	_ Driver's License	Number:		State:
Employer:				
	how long:			
	Average Monthly Income is \$			
Spouse's Name:	Maiden name:		_ Age:	Sex:
Spouse's Email:				
Spouse's Social Security Number:	Driver's Li	cense Number:		State:
Spouse's Employer:				
Spouse's Type of Work:				
Spouse's Phone at Work: ()	Average	monthly income is	\$	
	_	-		
List name, age and relationship of <u>all perso</u> and other co-residents).	ons that will be liv	ing on the premise	<u>s</u> (Inclual	ng chuaren
Name:	Age:	Relationshin:		
Name:	Age:	Relationship:		
Name: Name:	Age:	Relationship:		
List all vehicles to be parked on the premises				and trucks)
not have available parking spaces for trailers,				
Type of Vehicle: Year:				
Гуре of Vehicle: Year:				
Type of Vehicle: Year:	Make:	Lic No.:		State:
	IZ' 1/ XV . ' . 1.4 / I	D 1/ A		
W:11 1		breed/ Age:		
Will you or other occupants have a pet?	Kind/ Weight/ I	8		
Why are you leaving your current residence?				
Why are you leaving your current residence? Have you or your spouse ever been evicted?				
Why are you leaving your current residence? Have you or your spouse ever been evicted?				
Why are you leaving your current residence? Have you or your spouse ever been evicted? Have you or your spouse ever been sued for r	non-payment of ren	it, or damage to rent	al propert	y?
Will you or other occupants have a pet? Why are you leaving your current residence? Have you or your spouse ever been evicted? Have you or your spouse ever been sued for reduce you or your spouse ever been convicted.	non-payment of ren	it, or damage to rent	al propert	y?
Why are you leaving your current residence? Have you or your spouse ever been evicted? Have you or your spouse ever been sued for the Have you or your spouse ever been convicted. How were you referred to us? Stopped by:	non-payment of ren  I of a felony?  Friend (Name	and Complex):	al propert	y?
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Why are you leaving your current residence? Have you or your spouse ever been evicted? Have you or your spouse ever been sued for a Have you or your spouse ever been convicted. How were you referred to us? Stopped by: Locator Agency (Name): In Case of Emergency, Notify: Work Phone #: () Street Address: Zip Code: Applicant's Birth Date: Spo	non-payment of ren l of a felony? Friend (Name Locator Ag Relationship: City/State: ouse's Birth Date: OOR OLDER TO	and Complex): ent's Name: Home Phone #: 0	EE AGRE	y? EMENT!!!!
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Complex: \_\_\_\_\_ Unite Number: \_\_\_\_\_ Number of Bedrooms\_\_\_\_\_

Security Deposit Amount: \_\_\_\_\_ Rent Amount: \_\_\_\_\_

Manger's Initial: \_\_\_\_\_

Thank you for choosing the Smith Properties for your housing needs. Our goal is to provide you with quality service.

In order to maintain our property in good order, it is important that you return your unit in the condition in which it was received. Any damages accrued during your tenancy, beyond normal wear and tear, will be charged accordingly.

As per your lease agreement, maintenance request should be reported in writing. Please use the following e-mail address and please remember to include your apartment name and apartment number.

## fixit@smithpro.world

#### NO PARTIES ARE ALLOWED ON OUR PROPERTIES. A PARTY WILL RESULT IN A \$500.00 FINE AND RISK OF EVICTION.

No pets are allowed on our property, in our units, or in our homes, unless written authorization is

given; and only after pet has been are allowed, NO PIT BULLS An aggressive breed on the property, overnight pets are permitted, you	<b>ARE ALLOWED</b> . If you are a , a \$100 fine will be applied, n	o questions asked. Also, no			
	Position of				
Date:		Holder:			
We follow all Federal Fair Housi certification per year.	ing Rules and Our Staff attend	ls two Fair Housing Seminars for			
	OFFICE USE ONLY	Date:			
Complex:	Unit Number:	Number of Bedrooms:			
Security Deposit Amount:	rity Deposit Amount: Rent Amount:				

Manger's Initial: \_\_\_\_\_

## Smith Properties Management, Inc.

## Addendum to Lease Agreement Application for Rental

### "Minimum of 650 Credit Score required"

As per lease agreement betweer	i Simui i Topei	ties management me. a	uid
	dated	, for unit #	at the property
(Tenant's Name)			
known as	. I agree to hon	nor and execute all term	as and conditions of
said lease agreement.			
I,(Guarantor's Name)	, am agre	eing to be the guaranto	r for
(Tenant Name)	, and I ackr	nowledge that I have re	ad the lease
agreement and acknowledge tha	at the guarantee	e is valid for the entire	tenancy.
I can be reached by phone at ho	ome # ()	and office #	‡ ()
My fax number is ()	; and my	y street address is	(4.11)
(State and Zip code)		if there are any ques	(Address) stions or problems.
(Gua	arantor's email a	nddress)	
Signature of Guarantor Print name here SS# DOB: Verified			
Please Supply I.D. of	Addendum	Holder with Adde	ndum Applicatio
Note: Please fa	x the Addendu	ım/Application agreem	ent form to:
Oak Street (985) 419-0689 oak@smithpro.wo		(985)	can Street ) 542-1904 smithpro.world
Thank you, Smith Properties Management,	Inc.	JAL HOUSING PORTUNITY	
Office Use Only			
Credit Verified By: Date:		_	