

~TOWNEHOUSE VILLAGE APARTMENTS~

114 North 34th ST

Richmond, IN 47374

PHONE #: 765-966-4953 FAX #: 765-935-0351

email: townhousevillage@yahoo.com

Thank you for your interest in our apartment community.

APPLICATION FEES: \$30 PER ADULT OCCUPANT LISTED ON APPLICATION

ALL PAYMENTS MAY BE MADE BY CHECK OR MONEY ORDER ONLY.

COPIES OF SOCIAL SECURITY CARDS AND DRIVER'S LICENSE OR PICTURE ID FOR ALL ADULT OCCUPANTS MUST BE SUBMITTED WITH THE APPLICATION AND FEES IN ORDER FOR YOUR APPLICATION TO BE PROCESSED. ALL OCCUPANTS MUST BE LISTED ON APPLICATION.

THERE IS NO GUARANTEE ON THE PROCESS TIME FOR THE APPLICATION. THIS PROCESS USUALLY TAKES UP TO 48 HOURS BUT CAN TAKE LONGER IF NECESSARY.

ONCE THE APPLICATION PROCESS HAS BEGUN, THE FOLLOWING ADDITIONAL DOCUMENTATION WILL BE REQUIRED IN ORDER FOR THE PROCESSING TO BE COMPLETED:

- **Most recent income verification past 30 days along with employment valid verification**
- **Current or most recent rental valid verification**

PLEASE LET US KNOW IF YOU HAVE QUESTIONS OR IF WE CAN BE OF FURTHER ASSISTANCE.

THANK YOU! ~

~ TOWNEHOUSE VILLAGE APARTMENTS ~

APPLICATION DATE _____ DESIRED DATE OF OCCUPANCY _____

APARTMENT SIZE/FLOOR PLAN YOU ARE APPLYING FOR _____

APPLICANT FULL NAME _____ DATE OF BIRTH _____

CONTACT # _____ SOCIAL SECURITY # _____

EMAIL ADDRESS _____ CURRENT ADDRESS _____

CHECK THE FOLLOWING: DO YOU RENT _____ MORTGAGE _____ OTHER _____

HAVE YOU EVER: BEEN SUED FOR NON PAYMENT OF RENT? _____

BEEN EVICTED OR ASKED TO MOVE OUT? _____ BROKEN A RENTAL AGREEMENT? _____

BEEN SUED FOR DAMAGE TO PROPERTY? _____ DECLARED BANKRUPTCY? _____

TOTAL NET MONTHLY INCOME _____ VEHICLE YEAR/MAKE/MODEL/TAG# _____

CO-APPLICANT FULL NAME _____ DATE OF BIRTH _____

CONTACT # _____ SOCIAL SECURITY # _____

EMAIL ADDRESS _____ CURRENT ADDRESS _____

CHECK THE FOLLOWING: DO YOU RENT _____ MORTGAGE _____ OTHER _____

HAVE YOU EVER: BEEN SUED FOR NON PAYMENT OF RENT? _____

BEEN EVICTED OR ASKED TO MOVE OUT? _____ BROKEN A RENTAL AGREEMENT? _____

BEEN SUED FOR DAMAGE TO PROPERTY? _____ DECLARED BANKRUPTCY? _____

TOTAL NET MONTHLY INCOME _____ VEHICLE YEAR/MAKE/MODEL/TAG# _____

PLEASE LIST ALL OTHERS WHO WILL BE RESIDING IN APARTMENT: (ALL OCCUPANTS MUST BE LISTED)

NAME	RELATIONSHIP TO YOU	DATE OF BIRTH	SOCIAL SECURITY #(18 & UP)
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ADDITIONAL VEHICLES _____

DO YOU HAVE PETS? _____ HOW MANY? _____ (max of 2 pets allowed. Only one dog is allowed. Size and breed restrictions on dogs.)

BREED, WEIGHT, AGE _____ BREED, WEIGHT, AGE _____

BY SIGNING BELOW, ALL PARTIES LISTED ON THIS APPLICATION ACKNOWLEDGE AND AGREE TO ALL OF THE FOLLOWING INFORMATION IN REGARDS TO SUBMISSION OF THIS APPLICATION AND ANY PAYMENTS FOR APPLICATION FEE, SECURITY DEPOSIT OR RENTAL PAYMENTS:

APPLICATION FEES ARE \$30 PER ADULT THAT WILL BE OCCUPYING APARTMENT LEASED.

<APPLICATION FEES ARE NON REFUNDABLE EVEN IF YOU ARE NOT APPROVED>

SECURITY DEPOSIT REQUIRED IS \$500.

<\$100 ADMINISTRATION FEE OF THE SECURITY DEPOSIT IS AUTOMATICALLY NON REFUNDABLE ONCE YOU SIGN A LEASE>

<IF YOUR APPLICATION IS NOT APPROVED AND YOU HAVE PAID DEPOSIT MONEY DOWN TO RESERVE A UNIT, ANY SECURITY DEPOSIT PAYMENT MADE IS FULLY REFUNDED.

<IF YOUR APPLICATION IS APPROVED, YOU HAVE 72 BUSINESS HOURS AFTER YOUR APPLICATION WAS APPROVED TO RECEIVE A FULL REFUND SHOULD YOU CHANGE YOUR MIND.

By signing below, I hereby make application for an apartment and certify that all of the information I have provided is correct. I authorize you to contact any references I have listed including my current employer and rental references. I also authorize you to obtain my consumer credit report which includes a background report from your credit reporting agency which will appear as an inquiry on my file.

ALL ADULTS PLEASE SIGN BELOW:

Applicant _____ **Date** _____

co-applicant _____ **Date** _____

Additional adult occupant _____ **Date** _____

Additional adult occupant _____ **Date** _____

Additional adult occupant _____ **Date** _____

Additional adult occupant _____ **Date** _____

HOW DID YOU HEAR ABOUT US? _____

PLEASE TELL US WHY TOWNEHOUSE VILLAGE IS YOUR CHOICE TO LEASE

WITH? _____

TOWNE HOUSE VILLAGE APARTMENTS
114 NORTH 34TH STREET
RICHMOND, IN 47374
765-966-4953 765-935-0351 (FAX)

EMPLOYMENT VERIFICATION

DATE OF REQUEST _____

NAME _____

COMPANY _____

CONTACT PERSON _____

PHONE NUMBER _____

(BY SIGNING ABOVE, I GIVE PERMISSION FOR THIS COMPANY TO RELEASE INFORMATION TO TOWNE HOUSE VILLAGE APARTMENTS)

THE ABOVE NAMED PERSON HAS APPLIED FOR AN APARTMENT AND AS A PART OF THE APPLICATION PROCESS, WE NEED EMPLOYMENT VERIFICATION. PLEASE FILL OUT THE INFORMATION BELOW AND FAX BACK TO 765-935-0351. IF YOU HAVE ANY QUESTIONS, PLEASE FEEL FREE TO CALL THE OFFICE AT 966-4953.

THANK YOU FOR YOUR ASSISTANCE!

START DATE _____

POSITION OR TITLE OF EMPLOYEE _____

FULL OR PART TIME EMPLOYEE? _____

PERMANENT POSITION? _____

NAME AND TITLE OF PERSON FILLING OUT FORM:

TOWNE HOUSE VILLAGE APARTMENTS

114 NORTH 34TH ST
RICHMOND, IN 47374
(765)966-4953
(765)935-0351 FAX

RENTAL VERIFICATION

Requested by Julie Jones Title Property Manager

Resident(s) name(s) _____

Address _____

Applicant signature "I approve verification request" _____

Landlord or mortgage co name _____

Contact name, title, and contact number _____

Dates of residency _____

Current lease expires _____

Was tenant evicted? _____ reason? _____

Monthly rent amount _____ late payments? _____

Number of returned checks? _____ Proper notice? _____

Did tenant leave without notice? _____ Did tenant leave owing money? _____

Any problems or damages? _____

Did tenant have anyone live in address rented without permission? _____

Did tenant ever have bed bugs? _____ Did tenant cooperate with eradication procedures? _____

Would you re-rent? _____

Signature of person completing this form _____

Date signed _____ Title or relationship to applicant _____