

Oak Forest Apartments Application for Rental

Date _____	Address _____	Move In Date _____	Lease Term _____	Rate _____
App Fee \$35 _____	married \$50 _____	Rent Concession _____	Admin Fee \$50 _____	
Security Deposit _____	Pet Fee _____	Non refundable _____	St. Louis Co. Public Works \$40 _____	Mngr initials _____

Applicant's Name _____ Date of Birth _____ SS# _____
First M.I. Last
 Drivers License No. & State _____ cell# _____ Martial Status Sin Mar Div Sep

Spouse Name _____ Date of Birth _____ SS# _____
First M.I. Last
 Drivers License No. & State _____ cell# _____

<u>All other persons who will occupy Apartment</u>	<u>Relationship</u>	<u>Date of Birth</u>	<u>Student</u>	<u>Employed</u>
1. _____			Or	
2. _____			Or	

Present Address _____
Street Apt # City State Zip
 Dates: From-To _____ Monthly Payment _____ Hm. Phone # _____

Present Landlord/Resident Manager/Mortgage Co. _____ Phone _____ Rent / Own (Circle)

RENTAL

Reason for Moving _____ Moving From: Apt / Condo / Home / Townhouse / Other (Circle)

Previous Address _____
Street Apt # City State Zip
 Dates: From-To _____ Monthly Payment _____

Previous Landlord/Manager/Mortgage Co. _____ Phone _____ Rent / Own (Circle)

Have you, or your spouse ever been evicted for any leased premises? _____ If yes, Explain _____

Present Employer _____ Position _____

Business Address _____ Phone # _____
Street City St. Zip
 Supervisor or H.R. Representative _____ Dates of Employment _____

EMPLOYMENT

Previous Employer _____ Position _____
 Business Address _____ Phone # _____
Street City St. Zip
 Supervisor or H.R. Representative _____ Dates of Employment _____

Spouse's Employer _____ Position _____

Business Address _____ Phone # _____
Street City St. Zip
 Supervisor or H.R. Representative _____ Employed Since _____

Spouse's Previous Employer _____ Position _____
 Business Address _____ Phone # _____
Street City St. Zip
 Supervisor of H.R. Representative _____ Dates of Employment _____

Total Anticipated income form date of move-in through the next 12 month
 Annual Salary (Including Tips, Commissions, Bonuses, and Overtime) \$ _____
 Annual Salary Spouse (Including Tips, Commissions, Bonuses, and Overtime) \$ _____

I
N
C
O
M
E

Other Income Includes: Alimony, child support, parental support, aid to dependent children, welfare, unemployment, social security, annuities, insurance policies, retirement benefits, pensions, and other regular periodic payments. If you have any questions please consult personnel for assistance.

Source of Other Income	Yearly Gross Amount	Contact	Phone
1) _____	\$ _____	_____	_____
2) _____	\$ _____	_____	_____

BANK INFORMATION:

Asset Type	Bank/Savings & Loan/Credit Union	Average Monthly Balance	OFFICE USE ONLY
			Yearly \$ Received Asset
1.)			
Checking Account _____	_____	_____	_____
Savings Account _____	_____	_____	_____
Other _____	_____	_____	_____
2.)			
Checking Account _____	_____	_____	_____
Savings Account _____	_____	_____	_____
Other _____	_____	_____	_____

Emergency Contact Name _____ Relationship _____
 Address _____ Phone # _____

V
E
H
I
C
L
E

Year, Make, & Model _____ Color _____ License No. & State _____
 Year, Make, & Model _____ Color _____ License No. & State _____
 Condition of Vehicles _____ All vehicles must be in good working order.

Do you own any Pets? _____ If So, How Many? _____ Breed _____ Weight _____ Age _____

Have you, or your spouse ever been convicted of a felony? Yes No If yes explain _____
 I Certify that I was referred to this community by: _____

Applicant has submitted the sum of \$ _____ which is a non-refundable payment for a credit check and procession charge of this application. Such sum is not a rental payment or security deposit. This amount will be retained by management to cover the cost of processing application as furnished by the applicant; any false information will constitute grounds for rejection of application. I agree to pay the administration fee of \$ _____, which will be refunded to me in full if this application is not approved and accepted. Once approved, if I fail to take possession of the apartment, the administration fee will be forfeited. Upon acceptance and approval of this application, I agree to execute a lease agreement before possession is delivered and to pay the security deposit \$ _____ and other move-in costs.

I certify that the facts set forth in this application for rental are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I understand that a knowing and willful false statement on this application is grounds for rejection by the rental manager. It is understood that the Application is a part of the Lease and Resident hereby affirms that the statements and information contained in the Application are true and correct and that the Resident's authority to the Landlord to obtain credit information through the use of a Credit Reporting Agency, including, but not limited to the obtaining of a Consumer Credit Report on the Resident is a continuing right agreed upon by the Resident, including, but not limited to credit verification skip tracing, or the collection of any delinquent accounts which the Resident may maintain with the Landlord. The nature and scope of the investigation requested may include information obtained through personal interviews concerning residence verification, number of occupants, employment, occupation, habits reputation and mode of living. I agree to submit to Lessor a valid photo identification (such as a state driver's license) which will be photocopied and made a part of the application.

Signature

Date

Spouse Signature

Date

Oak Forest Apartments

10900 Oak Forest Parkway Dr.
St. Louis, MO 63146
314-567-0717

Employee _____

Social Security Number _____

I authorize the release of my employment information to Oak Forest Apartments and its agents.

Applicant Signature

Date



DEAR EMPLOYER:

_____ has applied for an apartment and has listed you as their current employer. We would appreciate the following information being completed by a supervisor or payroll department. This form must be signed with title and dated for us to complete our approval process.

Length of employment: _____

Position Held: _____

Gross Monthly Income: _____

Signature

Date

Title

For your convenience please fax this form to our office at **314-567-0817**.
Thank you in advance for your cooperation and time.

Oak Forest Apartments

10900 Oak Forest Parkway

St. Louis, MO 63146

Phone: 314-567-0717

Fax: 314-567-0817

Date: _____

To: _____

From: _____

Phone: _____

Fax: _____

The following applicant(s) has applied for residency. Please complete the requested rental information below and fax back at your earliest convenience. Thank you for your time and complete cooperation.

Applicant hereby authorizes verification of any and all information set forth in the Application for Rental, including release of information by any landlord (past or present).

Applicant Signature: _____

Date: _____

Applicant Signature: _____

Date: _____

Current Resident

Previous Resident

Name(s): _____

Address: _____ Apartment #: _____

Dates of Occupancy: _____

Rental Amount: _____

Length of Occupancy: _____

Any Lates? Yes No How Many? _____

NSF's? Yes No How many? _____

Any Pets? Yes No How many? _____ Size? _____

Proper Notice Given? Yes No

Deposit refunded? Yes No Would you release to them? Yes No

Has a dispossessory warrant ever been filed? Yes No How many? _____

Is there a balance outstanding to your community? Yes No

Information Given By: _____

Date: _____