

STONERIDGE APARTMENTS



Application Fee Received?
Yes ___ No ___

Form of Payment:
___ Check
___ Money Order

of
Gainesville

APPLICATION FOR RESIDENCY

Stoneridge Apartments does not discriminate on the basis of race, creed, religion, sex, national origin, age or disabilities.
We do business in accordance to the Fair Housing Laws

Apartment size you're applying for: 1 Bd ___ 2 Bd ___ 3 Bd ___ 4 Bd ___ Deposit Amount: \$ _____
How did you hear about us? Friend ___ Drive by ___ Internet ___ Apt. Guide ___ Apt. Hunters ___ Other _____
Date Range of Requested Residency: _____ Desired Floor: ___ (Premium rate for 3rd floor) Individual Lease ___ Yes ___ No
Leasing Special if applicable _____

Part I Personal Information

Contact Phone #: _____ Contact Email Address: _____
Applicant's Full Name: _____ Birth Date: ___/___/___
Driver's License #: _____ State: _____ Soc Sec #: _____ - _____ - _____
Spouse's Full Name: _____ Birth Date: ___/___/___
Driver's License #: _____ State: _____ Soc Sec #: _____ - _____ - _____
**Have you or your spouse/co-applicant ever pled guilty or no contest to, or been convicted of, a misdemeanor or felony and/or been arrested for any matter for which you are out on bail or on your own recognizance pending trial? ___ Yes ___ No
If Yes, please give the date(s) and details: _____

Part II Residence History

Have you ever had an eviction filed against you? Yes ___ No ___
Present Address: _____ Unit # _____ City: _____ State: ___ Zip: _____
Apartment Complex Name: _____ How long?: _____ mo(s)/yr(s)/day(s) Phone _____
Previous Address: _____ Unit# _____ City: _____ State: ___ Zip: _____
Apartment Complex Name: _____ How long?: _____ mo(s)/yr(s) /day(s) Phone: _____

Part III Employment History

Applicant Employer: _____ Salary: _____ per month / year/ week
Address: _____ City: _____ State: ___ Zip: _____ Hire Date: _____
Job Title: _____ Supervisor Name/Title: _____ Employer Phone #: _____
Spouse Employer: _____ Salary: _____ per month /year/ week
Address: _____ City: _____ State: ___ Zip: _____ Hire Date: _____
Job Title: _____ Supervisor Name/Title: _____ Employer Phone #: _____

Part IV Miscellaneous

Full Time Student: Yes ___ No ___ Additional Income & Source: _____
Major and Year of Expected Graduation: _____
**Person to Contact in Case of Emergency: _____ Relation to Applicant(s): _____
Phone #: _____ Address: _____ City: _____ State: ___ Zip: _____
Pet(s) ___ Yes ___ No How many? _____ Type(s) _____ Breed(s) _____ Weight(s) _____

Signature of Applicant: _____ Date: _____
Signature of Spouse/Co-Applicant: _____ Date: _____

This application will only be accepted as a complete Application of Residency if the Conditions of Application are signed by applicant(s) (See back for signatures)

Approval/Denial: _____ Approved By: _____ Date: _____

Conditions of Application

The Applicant(s) understands and agrees as follows:

1. Upon request, to provide a written Guaranty by a parent or legal guardian on a form provided by the Landlord.
2. To sign the Rental Agreement promptly when submitted. Except for this Application(s), the Rental Agreement constitutes the entire agreement between the Landlord and the Applicant(s).
3. That the Applicant(s) may not take possession of the apartment until the Landlord receives an executed Rental Agreement, the rent for the first full rental period, the security deposit (if required), proof of utility service and the executed Guaranty form (if applicable).
4. **Any and all deposit money, or otherwise called a "holding or good faith deposit", is considered non-refundable for any reason upon cancellation by you to fully execute a lease agreement. Upon moving in to your apartment, the holding deposit is then considered a security deposit. At that point, it becomes a security deposit and is refundable after executing the entire lease agreement as outlined in the lease agreement.**
5. That the acceptance of this application and deposit (if required) by the Landlord is only an Application for an apartment and **does not guarantee the availability of any specific apartment.**
6. That the information provided in this Application for Residency is true, correct, and complete. Any misstatement or omission of fact on the application may result in the termination of the Applicant(s)'s Rental Agreement. **The application fee is a non-refundable processing fee.**
7. That the Applicant(s) authorizes the Landlord to make any credit, employment, rental history, or investigative inquiries the Landlord deems necessary to accurately determine applicant(s) approval.
8. **Applicant(s) has seven days from the time they turn in deposit and/or application is received by Tivoli to return ALL required documentation, notarized guarantor forms, and application fees as deemed necessary by management. *Otherwise, deposit will be forfeited and apartment will NOT be secured.**

Deadline: ____/____/201__*

Please sign below that you understand and agree to the above terms:

Applicant Printed Name Applicant Signature _____
Date

Spouse/Co-Applicant Printed Name Spouse/Co-Applicant Signature _____
Date

Received by: (Agent Signature) _____
Date