## QUALITY PROPERTY MANAGEMENT (QPM) APPLICATION TO RENT

(All sections must be completed.) Individual applications required from each occupant 18 years of age or older.

| LAST NAME                             |                    | FIRST NAME             |                 | MIDDLE NAME             |             |  |                     | SOCIAL SECURITY NUMBER |                     |  |
|---------------------------------------|--------------------|------------------------|-----------------|-------------------------|-------------|--|---------------------|------------------------|---------------------|--|
| OTHER NAMES USED IN THE LAST 10 YEARS |                    |                        |                 | OTHER I.D.              |             |  |                     | WORK PHONE NUMBER      |                     |  |
|                                       |                    |                        |                 | O MEN IB                |             |  | ( )                 |                        |                     |  |
| DATE OF BIRTH DRIVER'S LICENSE NO.    |                    |                        |                 | EXPIRATION              | ON STATE    |  | HOME PHONE NUMBER   |                        |                     |  |
| PI                                    | lease nive         | at least 2 t           | full consecutiv | /e years of livir       | na histo    | nrv  |                     | ( )                    |                     |  |
| W                                     | e verify A         | LL living h            | istory so gaps  | s in time will re       | sult in I   | onger app  |                     |                        |                     |  |
| A 1                                   | pplicant M         | UST provi              | de previous la  | ndlords phone           | numbe       | ers to verif   | fy rental<br>STATE  | history.               |                     |  |
|                                       | FINESCINI          | ADDRESS                |                 | CITT                    |             |  | STATE               | ZIF GODE               |                     |  |
|                                       | DATE IN DATE OUT   |                        | DATE OUT        | OWNER/MGR NAME          |             | OWNER/MGR PHONE NO.  |                     | PHONE NO.              |                     |  |
|                                       | REASON FOR MOVING  |                        |                 |                         |             | (  |                     |                        |                     |  |
|                                       | NE/IOON            | . OK MOVING            |                 |                         |             |  |                     |                        |                     |  |
| 2                                     | PREVIOUS A         | ADDRESS                |                 | CITY                    |             |  | STATE               | ZIP CODE               |                     |  |
|                                       | DATE IN            | DATE OUT               |                 | OWNER/MGR NAME          |             | OWNER/MGR PHONE N  |                     | PHONE NO               |                     |  |
| DATEIN                                |                    | DATE OUT               |                 | OWNER/INGR NAIVIE       |             | OWNER/MOR FITON  |                     | THORE NO.              |                     |  |
|                                       | REASON             | FOR MOVING             |                 | L                       |             |  |                     |                        |                     |  |
| 3 NEXT PR                             |                    | EVIOUS ADDRESS         |                 | CITY                    |             | STATE  |                     | ZIP CODE               |                     |  |
| ľ                                     | NEXTTRE            | NEXT TREVIOUS ADDITION |                 | OHT                     |             | OTATE  |                     | 211 0002               |                     |  |
|                                       | DATE IN            | ]                      | DATE OUT        | OWNER/MGR NAME          |             | OWNER/MGR PHONE NO.  |                     | PHONE NO.              |                     |  |
|                                       | REASON             | FOR MOVING             |                 |                         |             |  |                     |                        |                     |  |
|                                       |                    |                        |                 |                         |             |  |                     |                        |                     |  |
|                                       |                    | NAME                   |                 | DOB if un               | nder 18 yrs | NAME   |                     |                        | DOB if under 18 yrs |  |
| PROPOSED<br>OCCUPANTS<br>LIST ALL IN  |                    |                        |                 |                         |             |  |                     |                        |                     |  |
|                                       |                    | NAME                   |                 | DOB if un               | nder 18 yrs | NAME   |                     |                        | DOB if under 18 yrs |  |
| ADDITION TO<br>YOURSELF               |                    | NAME                   |                 | DOB if un               | nder 18 yrs | NAME   |                     |                        | DOB if under 18 yrs |  |
|                                       |                    |                        |                 |                         |             |  |                     |                        |                     |  |
| WILL YOU<br>HAVE PETS?                |                    | DESCRIB                | E               |                         |             | LL YOU HAVE  | DESC                | RIBE                   |                     |  |
| 11/                                   | WETETO:            |                        |                 |                         | FUF         | RNITURE?   |                     |                        |                     |  |
| Α                                     |                    | CCUPATION<br>OF INCOME |                 |                         |             | EMPL<br>NAME   | LOYER<br>E          |                        |                     |  |
|                                       | HOW LONG           |                        |                 | PERVISOR'S<br>ONE # ( ) |             |  | EMPLOYER<br>ADDRESS |                        |                     |  |
| NAME OF Y                             |                    |                        | PH              | <i>Γ</i> ΙΥL <i>π</i> ( |             |  | CITY, STATE         |                        |                     |  |
|                                       | SUPERVISO          |                        |                 | ZIP                     |             |  | , SIAIE             |                        |                     |  |
| В                                     | PRIOR<br>OCCUPATIO | DN .                   |                 |                         |             | EMPLOYER<br>NAME   |                     |                        |                     |  |
|                                       | HOW LONG           |                        | SUI             |                         |             |  | LOYER               |                        |                     |  |
| EMPLOYER*                             |                    |                        |                 | ONE # ( )               |             | ADDRESS  |                     |                        |                     |  |
| NAME OF YOUR<br>SUPERVISOR            |                    |                        |                 |                         |             |  | , STATE             |                        |                     |  |
| CL                                    | JRRENT GROS        | S INCOME               | CHECK           | ONE                     | DI          | nase attac   | h 2 CIID            | RENT nav stube or      | income              |  |
| \$ PER  WEEK                          |                    |                        |                 |                         |             | Please attach 2 CURRENT pay stubs or income statements for verification. |                     |                        | HICUIIIE            |  |
| •                                     |                    |                        |                 |                         | Th          | This includes SSI, Cash Aid, Disability ect                              |                     |                        |                     |  |

## (All sections must be completed.)

| IN CASE OF EMERGENCY, NOTIFY:  | ADDRESS   |  | PHONE  |                                       | RELATIONSHIP   |  |  |  |  |  |  |  |
|--|---|--|--|---------------------------------------|--|--|--|--|--|--|--|--|
| 1.   |   | (  | )  |                                       |  |  |  |  |  |  |  |  |
| 2.   |   | (  | )  |                                       |  |  |  |  |  |  |  |  |
| Automobile: Make   | Model   | Voor                                     | Licence #  |                                       |  |  |  |  |  |  |  |  |
| Automobile: Make   |   |  |  |                                       |  |  |  |  |  |  |  |  |
| Other motor vehicles:  |   |  | Election #                                       |                                       |  |  |  |  |  |  |  |  |
| If you answer yes to any of these questions, please write year of occurrence and give a brief explanation.  Have you ever filed for bankruptcy?  |   |  |  |                                       |  |  |  |  |  |  |  |  |
|  |   |  |  |                                       |  |  |  |  |  |  |  |  |
| Have you ever been evicted or asked to move out?   |   |  |  |                                       |  |  |  |  |  |  |  |  |
| Have you ever been convicted for selling, distributing or manufacturing illegal drugs?   |   |  |  |                                       |  |  |  |  |  |  |  |  |
| Have you ever been convicte  | d of a felony?  |  |  |                                       |  |  |  |  |  |  |  |  |
|  |   |  |  |                                       |  |  |  |  |  |  |  |  |
| Applicant represents that all the above sobtaining of a credit report and agrees to information to previous or subsequent of the second | o furnish additional credit references                                    | ereby authorizes ve<br>upon request. App | rification of the abov<br>licant consents to all | re items including<br>low owner/manag | g, but no limited to, the<br>ger to disclose tenancy |  |  |  |  |  |  |  |
| Owner will require a payment of \$   | , which is to be used to s  | screen Applicant wit                     | h regards to credit hi                           | istory and other b                    | oackground   |  |  |  |  |  |  |  |
| information. The amount charged is ited  1. Actual cost of credit repor  | mized as follows:<br>t, unlawful detainer (eviction) search,              | and/or other screer                      | ning reports                                     | <u>\$</u>                             | 15.00  |  |  |  |  |  |  |  |
| 2. Cost to obtain, process an  | nd verify screening information (may i                                    | nclude staff time an                     | d other soft costs)                              | <u>\$</u>                             | 15.00  |  |  |  |  |  |  |  |
| Total fee charged (cannot<br>The undersigned makes application to r  | exceed \$30 per applicant, which may<br>ent housing accommodations design | be adjusted annual<br>ated as:           | ly with the CPI as of                            | 1-1-98) <u>\$</u>                     | 30.00  |  |  |  |  |  |  |  |
| Apt. NoLocated   | d at Willow Run Apartment Homes   | _  |  |                                       |  |  |  |  |  |  |  |  |
| The rent for which is \$   | per month and upon approval of this app                                   | olication agrees to sig                  | n a rental or lease agre                         | eement and to pay                     | ı all  |  |  |  |  |  |  |  |
| sums due, including required security depo   | sit of <u>\$</u> , before occupanc  | y.                                       |  |                                       |  |  |  |  |  |  |  |  |
|  |   |  |  |                                       |  |  |  |  |  |  |  |  |
| Date   | Applicant (sig  | gnature required)                        |  |                                       |  |  |  |  |  |  |  |  |

## **QPM CODE FOR EQUAL HOUSING OPPORTUNITY**

QPM supports the spirit and intent of all local, state and federal fair housing laws for all residents without regard to color, race, religion, sex, marital status, mental or physical disability, age, familial status, sexual orientation, or national origin.

QPM reaffirms its belief that equal opportunity can best be accomplished through effective leadership, education, and the mutual cooperation of owners, managers, and the public.

QPM agrees to abide by the following provisions of this Code for Equal Housing Opportunity:

- We agree that in the rental, lease, sale, purchase, or exchange of real property, owners and their employees have the responsibility to offer housing accommodations to all persons on an equal basis.
- We agree to set and implement fair and reasonable rental housing rules and guidelines and will provide equal and consistent services throughout our residents' tenancy.
- We agree that we have no right or responsibility to volunteer information regarding the racial, creed, or ethnic composition of any neighborhood, and we do not engage in any behavior or action that would result in "steering."
- We agree not to print, display, or circulate any statement or advertisement that indicates any preference, limitations, or discrimination in the rental or sale of housing.