

THE VILLAGE AT CLARK BROOK APARTMENTS

APPLICATION PROCESSING

Thank you for choosing Metropolis Property Management Group Inc. to assist you in finding your new apartment. Below is a description of the application process and the associated fees.

The Application for consideration must be filled out completely. Every question, box or space must have an answer, checkmark or response.

THREE (3) SEPARATE FEES ARE DUE AT THE TIME OF APPLICATION:

PAYMENT/CHECK #1:

Application Fee to reimburse management for the cost of Credit Check and Landlord History Report \$25.00 PER ADULT OVER 18 One-time fee, non-refundable Payable to: Metropolis Property Management Group, Inc.

PAYMENT/CHECK #2: Criminal Background Check

\$25.00 PER ADULT OVER 18 OCCUPYING THE HOUSEHOLD, non-refundable

Payable to: State of New Hampshire

PAYMENT/CHECK #3: Holding Fee – Applied towards total amount due for Security Deposit. **Security Deposit held is equal to one month's rent.**

\$500.00 Minimum, non-refundable after 48 hours (see Holding Fee agreement)

Payable to: Metropolis Property Management Group, Inc.

PET FEE REQUIRED:

Per Cat: One Time Registration Fee \$35, plus \$25/month Per Dog: One Time Registration Fee \$150, plus \$35/month

Pet registration fee due with the lease signing

Applicants will be required to provide evidence of renters' insurance with liability coverage for those that are applying for an apartment where the household includes a dog or a cat.

No applications will be processed without payment in accordance with above.

If you have any questions, please call 603.666.4518.

Your Property Manager is: Debbie Day



1662 Elm Street, Manchester, New Hampshire 03101 Office number: 603-666-4518 Fax Number: 603-644-3657

Website: www.metropolispmg.com



Receiving Office Use Only	Date
	Received:
Property Manager Name:	
Building - Unit:	
Bedrooms:	
Pet Fees Required	
Agreed Rent Amount:	
Holding Fee Amount:	

THE VILLAGE AT CLARK BROOK APPLICATION

PLEASE PRINT. PLEASE ANSWER ALL QUESTIONS!

Do not leave any space or blanks. Write "NO or N/A" where appropriate.

PART I - FAMILY COMPOSITION - To be completed by applicant

Directions to Applicant: Please complete the table below for each member of your household, whether or not those members are related. Include all members who you anticipate will live with you at least 50% of the time during the next 12 months.

Name <u>ALL</u> People to Occupy Unit LAST NAME FIRST MI	DOB	Age	Sex	Relationship	Social Security#
1.				HEAD	
2.					
3.					
4.					
5.					
6.					
7.					
8.					

	contact information for all House		-	
Current/Legal Address:				
Email Address: Cell Phone				
Current/Legal Address:				
Email Address:				
Current/Logal Address:				
Current/Legal Address:				
Email Address:				
Cell Phone	nome	e priorie		
If any member of the household ha	is used another name, please lis		en name, former name, o ame used	etc)
Former name used		Current n	ame used	
	PART II - RENTAL HISTOR	DV - To be comp	loted by applicant	
	TAKTIT- KERTAL MOTO	TO be comp	applicant	
	ent & Previous Landlords:	oto \		
Current Address	ncluding any owned by applicar Rent/Month	Utilities/Month	Reason for Leaving	
Ourient Address	Кенимони	Othities/Month	Reason for Leaving	
Landlord Name	Landlord Address			Landlord Phone
Landiord Name	Landiora Address			Landiora i none
When did you move in:	N	/hen did you move	out.	
Previous Address	Rent/Month	Utilities/Month	Reason for Leaving	
Landlord Name	Landlord Address			Landlord Phone
When did you move in: When did you move out:				
Previous Address	Rent/Month	Utilities/Month	Reason for Leaving	
Landlord Name	Landlord Address			Landlord Phone
When did you move in:		When did you r	nove out:	
-				

3. How	did you hear about this housing opportunity?			
4. Were	you referred by an existing resident of one of our p	roperties? YES NO		
	Referring Name:Referrer Address/Unit:			
		Do we have permission to thank them for the referral?	YES	NO
5. If No, 1	then how did you learn about this available unit? F	Please Circle		
	Metropolis Website	Craigslist		
	Rent.com	Facebook		
	Trulia	Twitter		
	Zillow	Other		
	Drove by Property	The Way Home		
	Newspaper			
	Housing Authority - Please specify			
	Local Service Provider – Please Specify			
6. Do yo	Pets:			
	Туре:			
	How Many?			
	Breed:			
	Please Note:			
	Per Cat: One Time Registration Fee \$35, plus \$3	25/month		
	Per Dog: One Time Registration Fee \$150, plus \$35/month			
	The Registration Fee covers the cost of docume on the property.	entation and other pet amenities which may be provide	ed	

PART III - EMPLOYMENT HISTORY - To be completed by applicant

7. Head's Current Employer:						
Date Hired:	Date terminated:		Supervisor			
Salary: \$	Circle One:	Annually	Weekly	Bi-Weekly	Monthly	
Employer Address:						
Address	City	Sta	te Zip	Phone #:		
8. Head's Previous Employer:						
Date Hired:	Date terminated:		Superviso	r:		
Salary: \$	Circle One:	Annually	Weekly	Bi-Weekly	Monthly	
Employer Address:						
Address	City	Sta	te Zip	Phone #:		
9. Spouse Current Employer:						
Date Hired:	Date terminated:		Supervisor	/2 2		
Salary: \$	Circle One:	Annually	Weekly	Bi-Weekly	Monthly	
Employer Address:						
Address	City	Sta	te Zip	Phone #:		
10. Other Applicant's Current Em	ıployer:					
Date Hired:	Date terminated:		Supervisor			
Salary: \$	Circle One:	Annually	Weekly	Bi-Weekly	Monthly	
Employer Address:						
Address	City	State	e Zip	Phone #:		
	•		•			
P	PART IV - OTHER - To b	e completed b	y applicant			
11. Do you have full custody of your	child (ren)? Explain th	e custody arra	ingements:			Yes/ No
40 Would you are any mambars of ye	our bouggbold bonefit f	vom a handisa	unnad aaaaai	hla unit?		
12. Would you or any members of your lifyes, explain:	our nousenoid benefit i	rom a nandica	ippeu-accessi	bie unit?		
13. Have you ever been evicted?						Yes/No
If yes, explain:						Yes/ No
14. Have you filed for bankruptcy?						
If yes, explain:				Yes/No		
15. Have you ever been convicted of a felony?						
If yes, explain:				Yes/No		
16 Will your household be eligible or are you applying to receive Section 8 rental assistance in the next 12				Yes/No		
PART V - IN CASE OF EMERGENCY, NOTIFY: - To be completed by applicant						
				T		
Name/ Polationship	į –	Addroce		i	Dhono	

PART VI - RESIDENT'S STATEMENT - To be completed by applicant

PLEASE READ THE FOLLOWING CAREFULLY

I do hereby certify that all the information provided in this housing application is complete and accurate to the best of my knowledge. Authorization is granted to verify the information in this application. I authorize any person, partnership, corporation, association or governmental agency, possessing information on such matters to release such information to Metropolis Property Management Group, Inc., and I release and save harmless the respective respondent. I understand that a wage and benefit check may be made through the Department of Labor, Licensing and Regulation, and that a criminal background check may be conducted. Authorization is also granted to check with federally assisted housing agencies to determine if any debt is owed.

I/We understand that I/We must pay a holding fee prior to occupancy. I/We understand that holding fee used to place a hold on any unit is Nonrefundable after 48 Hours of Receipt			
SIGNATURE OF ALL PARTIES TO THIS APPLICATION, 18 YEARS OR O Applicant Signature (Head)	ate		
Applicant Signature (Co-Head)	ate		
Other Applicant Signature (Over 18 years of Age)	ate		
Other Applicant Signature (Over 18 years of Age)	Date		
,			
Did anyone help and assist you in filling out this application?	Yes/No		
	Date		
Signature			
	Date		
Signature of person who assisted with application and their relationship to applicant			

Reason for the assistance: