

Barber Knolls Development Corp.
416 Crocus
P.O. Box 12
Barberton, Ohio 44203
phone 330-848-2989 fax 330-848-3643 email barberknolls@barberknolls.com

Application Instructions

All persons over 18 years old must fill out a separate application and sign the lease.

The following must be included with all applications:

1. A check or money order (no cash) for your non-refundable \$50.00 application fee.
2. Photocopies of:
 - current* pay stubs for two *consecutive* months*
 - valid driver's license, valid state ID or equivalent
 - social security card
 - proof of insurance for all vehicles
 - electric, gas and water bills for the past two months
3. Proof of payment to your current landlord for the past two months. Cancelled checks, carbon copies of money orders or written receipts are accepted.

Exemptions to the application fee:

United States of America active military duty and military veterans with honorable discharge are exempt from the application fee.

Approved applications and leases:

Apartments will be held exclusively for prospective tenants for thirty (30) days with the payment of a *full* security deposit. Failure to sign a lease within the thirty day period will result in forfeiture of the security deposit.

Rent payments should not amount to more than 30% of your total gross income.

rent of \$590/month = income of \$1,966.67/month or greater
rent of \$600/month = income of \$2,000.00/month or greater
rent of \$630/month = income of \$2100.00/month or greater
rent of \$640/month = income of \$2133.33/month or greater
rent of \$675/month = income of \$2250.00/month or greater
rent of \$700/month = income of \$2333.33/month or greater
rent of \$725/month = income of \$2416.66/month or greater
rent of \$730/month = income of \$2433.00/month or greater

September 2018 Barber Knolls Development Corporation

Barber Knolls Development Corporation
www.barberknolls.com

Date _____ Rent \$ _____ Security \$ _____ Apartment desired _____
2 BDRM _____ 3BDRM _____

Tenant Responsible For: GAS ELECTRIC WATER/SEWER Move In Date _____

Name _____
Last First M.I. Telephone Email

Date of Birth _____ Driver's License # _____ State _____ Social # _____

Current Address _____ Married? ___ Spouse Name _____
No. Street City State Zip

Current Owner/Manager _____
Name Address Phone Years at address

Previous Address _____
No. Street City State Zip

Previous Owner/Manager _____
Name Address Phone Years at address

Current Employment _____
Company Address City State Phone Years of employment

Position _____ Supervisor Name _____ Salary _____

Previous Employment _____
Company Address City State Years Phone

Position _____ Supervisor's Name _____ Salary _____

In case of emergency notify:

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Have you ever broken a lease, gone through foreclosure, or had an eviction filed against you? Yes ___ No ___

If yes, please explain: _____

Have you ever filed bankruptcy? Yes ___ No ___ **Are you an illegal substance abuser?** Yes ___ No ___

Have you ever been arrested or convicted on a drug related or felony charge? Yes ___ No ___

Are there any outstanding judgments or garnishments against you? Yes ___ No ___

Are you obligated to alimony, child support or separate maintenance? Yes ___ No ___

Are you currently a named party in a lawsuit? Yes ___ No ___ **Have you ever been garnished?** Yes ___ No ___

Any outstanding debts or monthly financial obligations? Yes ___ No ___ describe _____

Total number of occupants: _____

How many vehicles would you keep at this address? _____ (two per apartment permitted)

Make _____ Color _____ Year _____ Plate Number _____

Make _____ Color _____ Year _____ Plate Number _____

Personal References (Do not list landlord or relative.)

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

We understand that Barber Knolls Development Corp. will rely on our statements contained herein and accept personal responsibility for all losses incurred as a result thereof. The undersigned hereby authorizes Barber Knolls Development Corp. to make or cause to be made either for the purpose of granting or maintaining an account and understand that they will make or cause to be made an investigative consumer report concerning the applicant's credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, and mode of living and thereby authorizes applicant's employers or any previous employers to furnish credit information for the purpose of the report. I understand that a NON -REFUNDABLE application fee of fifty dollars (\$50.00) will be charged for the application to be processed. I understand that the landlord may terminate my lease for any misrepresentations made above.

NOTE: You have the right to know the nature and scope of any investigation made pursuant to the above authorization within a reasonable time after you so request or after any investigative consumer report is requested.

Applicant's Signature

Date

Authorization For Release of Information

Purpose: The management of Barber Knolls Development Corp. may use this authorization and the information obtained with it to administer and enforce rules and policies related to the rental of property owned and/or managed by the above named organization.

Authorization: I authorize the above named organization to obtain information about me or my family that is pertinent to the rental of property owned and/or managed by the organization.

Information Covered-Inquiries may be made about: child care expenses, credit history, criminal activity, family composition, employment/income/pensions/assets, federal/state/tribal/local benefits, handicapped assistance expenses, identity and marital status, medical expenses, social security numbers, and residences and rental history.

Individual/Organizations that may release information: Any individual or organization including any governmental organization may be asked to release information. For example, information may be requested from: Banks and other financial institutions, courts, law enforcement agencies, credit bureaus, employers, present and past, landlords, schools and colleges, U. S. Social Security Administration, U. S. Dept of Veterans Affairs, Utility Companies, welfare agencies, Providers of: Alimony, child care, child support, credit, handicapped assistance, medical care and pensions/annuities.

Computer matching notice and consent: I agree that the above named organization may conduct computer matching programs with other government agencies including Federal, State, Tribal or local agencies. The government agencies include: U. S. Office of Personnel Management; U. S. Social Security Administration; U. S. Dept. of Defense; U. S. Postal Service; State Employment Security Agencies; and State Welfare and Food Stamp Agencies. The match will be used to verify information supplied by the applicant(s).

Conditions: I agree that photocopies of this authorization may be used for the purposes stated above. If I do not sign this authorization, I understand I may be denied occupancy of rental property owned and/or managed by Barber Knolls Development Corp.

Print legal name

birthdate

last 4 digits of social security number

Signature

Date