

Spartan Crossing

...an exclusive student community.

700 Granite Street

Greensboro, NC 27403

Phone 336-501-2557 • Fax 336-478-4442

email: spartancrossing@gmail.com

www.spartancrossing.com

Application Process

◆ Each resident must complete an application.

◆Required from student:

- Signature on “Rental Scoring and Your Rental Application”
- Student rental application
- Roommate matching form
- Application Process

◆ Co-signers **are required** for each resident.

- ◆ Does not have to be a parent, but must be over the age of 21 and have verifiable income and good credit
- ◆ Co-signer will be a guarantor of the lease agreement

◆Required from co-signer:

- Signature on “Rental Scoring and Your Rental Application”
- Co-signer rental application
- Co-signer addendum to lease. **THIS FORM MUST BE NOTARIZED AND CO-SIGNERS MUST INITIAL ALONG THE RIGHT HAND SIDE OF LINES 1 THRU 6.**
- A form of income verification (pay stub, tax return, W-2)
- Application Process

IF BOTH PARENTS WISH TO CO-SIGN, THE PREVIOUS STEPS MUST BE COMPLETED BY EACH PARENT. FAILURE TO SUBMIT THE APPLICATION COMPLETELY AND CORRECTLY WILL DELAY THE APPLICATION PROCESSING TIME.

We Will Check...

- ◆ The Applicant’s Criminal history must be clear from misdemeanor and felony charges and convictions.
- ◆ The Co-signer’s Credit and ability to income qualify.

*****PLEASE NOTE: If you have someone in mind to be your roommate, it is important that they apply within 2 weeks time of you submitting your application. If your prospective roommates fail to apply and pay all fees within this 2 week period, we may have no choice but to match you with someone else. Please understand that we do our very best to accommodate everyone’s request.**

Monies Required

- ◆ A Non-Refundable Application Fee of \$50.00 will be collected first in order to process your application
- ◆ Once you are approved (applications are processed the day they are received), we will collect a \$99 non-refundable reservation fee. **All checks/money orders should be made payable to Spartan Crossing and mail to: Spartan Crossing, 819 N. Elm Street, Greensboro, NC 27401.**

We do not accept cash.

Resident Signature

Cosigner Signature

This community is locally owned and operated.

GRANWOOD PROPERTIES, LLC
STUDENT RENTAL APPLICATION
PLEASE ANSWER ALL QUESTIONS

Date of Application _____ Desired move-in date _____ Unit # assigned _____

Applicant's Name: _____ Date of Birth: _____ mm/dd/yyyy

Social Security #: _____ Driver's License #: _____

Telephone #: (mobile) _____ (home) _____

Email Address: _____

Check One: _____ Freshman _____ Sophomore _____ Junior _____ Senior

I attend: (Name of University/College): _____

Current Address: _____

Check one: _____ home _____ Rent _____ Other _____ Monthly Rent \$ _____

Name of Apartment Community: _____

Telephone # of Apartment Community: _____ Fax #: _____

Home Address (when not @ school) _____

Employed by: _____ Position/Title: _____

How long on job: _____ Income: \$ _____ Hourly/ Monthly/ Yearly

Supervisors Name: _____ Telephone #: _____

Others who will occupy apartment:

Name _____ Age _____ Relationship _____

Name _____ Age _____ Relationship _____

*The applicant(s) agree to execute a lease and pay the prorated and/or first month's rent before possession is given. **The applicant(s) has a maximum of three days within which to cancel this application in writing and have his/her security deposit returned to him/her. If this application is canceled after 3 days, or should the applicant not execute a lease or occupy premises, the security deposit will be forfeited.** If application is not approved by the owner or agent, the security deposit will be returned. The Application Fee of \$ _____ and the Administrative Fee of \$ _____ are non-refundable.*

By signing, the applicant(s) gives permission for the Landlord or agent to investigate the information supplied on this application and a full disclosure of pertinent facts may be made to the Landlord. Applicant understands that approval process will include a review of credit history and criminal background check. Furthermore, the undersigned declares that the information provided on this application is true and correct and false statements or information may result in the rejection of this and future applications for housing managed by Spartan Crossing Apartments.

Applicant Signature

Date

Co-Signer

EMPLOYMENT/INCOME VERIFICATION

This request for verification of employment or income information on the below referenced individual is part of the application approval process for residency in an apartment community managed by Spartan Crossing Management.
&

Please attach a W2 or recent Paycheck Stub to this sheet.

I, _____ (_____)
Signature of Applicant Printed Name of Applicant

give permission for the information requested below to be released to Spartan Crossing Apartments for the purpose of application approval.

Company Name: _____

Applicant's position with company: _____

Dates of employment: From: _____ To: _____

Rate of pay: \$ _____ monthly
(Circle one)

Average number of hours in work week: _____

Probability of continued employment: _____

Name and title of person verifying information: _____
(Please print title)

(Signature of person verifying information)

(Printed name of person verifying information)

Please fax back to 336-478-4442.
Thank you!

ROOMMATE MATCHING

Name _____ Phone (_____) _____

Current Address _____

City/State/Zip Code _____

E-Mail Address _____

Gender: Male Female Desired Move-In Date ____/____/____

Please indicate your order of Preference by Writing 1st, 2nd, & 3rd in line provided:

Preferred Floor: _____ First Floor _____ Second Floor _____ Third Floor

ROOMMATE QUESTIONNAIRE

Your Age as of Today: _____ I attend: (Name of University/College): _____

College Academic Level: Freshman Sophomore Junior Senior Grad

My Preference of Roommate Is:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	<input type="checkbox"/> Either
I Like to Keep My Room:	<input type="checkbox"/> Very Neat	<input type="checkbox"/> Somewhat Tidy	<input type="checkbox"/> Untidy
I Would Describe Myself As:	<input type="checkbox"/> Very Quiet	<input type="checkbox"/> Average	<input type="checkbox"/> Noisy
I Study:	<input type="checkbox"/> Often	<input type="checkbox"/> Average	<input type="checkbox"/> Seldom
I Smoke:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Outside Only
I Drink	<input type="checkbox"/> Often	<input type="checkbox"/> Average	<input type="checkbox"/> Never

PREFERRED ROOMMATE(S):

Name: _____ Phone#: _____

Name: _____ Phone#: _____

Name: _____ Phone#: _____

By signing below, I understand that this information will be made public to other residents in search of roommates. I acknowledge that the Landlord is not responsible or liable for any claims, damages, or actions of any nature whatsoever relating to, arising out of or connected with disputes between potential or selected roommates. The Landlord abides by Federal Fair Housing Laws when assigning roommates. I acknowledge that the Landlord strives to accommodate the desired Apartment size and roommate preferences, however Landlord cannot guarantee all preferences can be met. If I do not advise Landlord of my preferred Roommates, Landlord will assign Roommate(s) to my unit. If any facts are determined false, it shall constitute a default of this Agreement pursuant to Paragraph 35, and in such an event, Lessor shall have all the rights and remedies set forth in this Agreement, including but not limited to Lessor's ability to terminate Resident's tenancy immediately and seek possession of the Premises and collect from Resident any damages incurred, including reasonable attorney's fees.

Signature of Applicant

Date

Rental Scoring & Your Rental Application

Many landlords rely upon “Rental Scores” to estimate the relative financial risk of leasing an apartment to you. In addition to estimating risk, rental scores are an objective and consistent way of reviewing relevant applicant information, and help speed the application approval process.

How is my rental score determined?

Rental scoring systems assign points to certain factors identified as having a statistical correlation to future financial lease performance. Your rental score results from a mathematical analysis of information found in your credit report, application, and previous rental history. Such information may include your bill-paying history, the number and type of accounts you have, collection actions, outstanding debt, income, and the number of inquiries in your consumer report. The final number, or rental score, represents an estimated level of risk as compared to the performance of other consumers in a range of scores.

Because your rental score is based upon real data and statistics, it is more reliable than subjective methods of evaluating your information. Rental scoring treats all applicants consistently and impartially. Additionally, your rental score never uses certain characteristics like-- race, color, sex, familial status, handicap, national origin, or religion-- as factors.

How is my rental score used?

Rental decisions are based upon how much risk a landlord is prepared to accept. Each landlord, therefore, sets the minimum score required for approval of an application. It is possible for your rental score to yield different results depending upon where you apply. Your rental score might mean a denial at one property, while the same score might be approved at another. It all depends upon the risk a landlord is prepared to accept.

What can I do to improve my rental score?

Your rental score may change if the underlying information it is based upon changes. The total improvement, however, generally depends on how that factor relates to other factors considered by the scoring system. Nevertheless, to improve your rental score, concentrate on paying your bills on time, paying down outstanding balances, and not taking on new debt. Your chances of approval should also improve if you apply for an apartment with lower monthly rent.

Where can I have my score explained?

Should your application be denied based upon your rental score, you can learn which factors most negatively influenced your score by contacting the consumer reporting agency listed below. Additionally, you can obtain a free copy of your consumer report, if you make the request to the consumer reporting agency within 60 days of the denial.

First Advantage SafeRent, Inc.
ATTN: Consumer Relations Department
11140 Rockville Pike, PMB 1200
Rockville, MD 20852
Ph. (888) 333-2413

Applicant Signature

Date

Co-signer Signature

Date

CO-SIGNER RENTAL APPLICATION

PLEASE ANSWER ALL QUESTIONS

This applicant is Co-Signer for _____
(Name of resident to occupy apartment)

CO-SIGNER INFORMATION:

Applicant's Name: _____ **Date:** _____

Social Security Number _____ Date of Birth: _____

Driver's License #: _____ Email Address: _____

Telephone #:(mobile) _____ (home) _____ (work) _____

Check one: Married Divorced Separated Single

Present Address _____

Check one: Own home Rent Other

Name of Apartment Community or Mortgage Company: _____

Telephone # of Apt. Comm. or Mort. Comp: _____ Fax #: _____

Monthly Rent or Mortgage payment: \$ _____

Employed by: _____ Position/Title: _____

How long on job: _____ Income: \$ _____ Monthly

Supervisors Name: _____ Telephone #: _____

If you would like us to consider a spouse, please complete information below.

Spouse's Name _____ **Social Security #:** _____

Date of Birth: _____ Driver's License #: _____

Employed by: _____ Position/Title: _____

How long on job: _____ Income: \$ _____ Hourly/ Monthly/ Yearly

Supervisors Name: _____ Telephone #: _____

By signing, the applicant(s) gives permission for the Landlord or agent to investigate the information supplied on this application and a full disclosure of pertinent facts may be made to the Landlord. **Applicant understands that approval process will include a review of credit history and possible criminal background check.**

Furthermore, the undersigned declares that the information provided on this application is true and correct and false statements or information may result in the rejection of this and future applications for housing managed by Spartan Crossing Apartments.

Applicant (co-signer) Signature

Date

Spouse's Signature

Date

WHY WE ASK FOR THIS INFORMATION...

By Co-Signing for resident listed above, you are asserting (through good credit and verifiable income) that should the resident default on payment, you will be responsible for the amount due to management. We verify co-signer's ability to pay through credit reporting agencies, including but not limited to SafeRent and EquiFax Credit Reporting Agencies. We must have all the information requested on this application for proper checks to be completed. For your safety, we hold this information confidential and do not release or sell it to outside parties.

CO-SIGNER ADDENDUM TO LEASE
SPARTAN CROSSING APARTMENTS

This portion of the application is the actual co-signer agreement for said lease at Spartan Crossing Apartments. This co-signer agreement is an addendum to the lease between Spartan Crossing Apartments and the resident(s) and will obligate you for any and all rents and damages incurred by the resident(s) that may become due to Spartan Crossing Apartments over the term of the lease. The resident(s) name and relationship to the co-signer need to be filled in by you below in the appropriate spaces and then initialed where indicated, then please sign at the bottom in the presence of a public notary. Then simply return the form to the property Leasing Office. If you have any questions, please call (336) 501-2557.

**PLEASE
INITIAL
BELOW**

CO-SIGNER AGREEMENT TERMS:

- 1. Apartment Complex: Spartan Crossing Apartments _____
- 2. Full name of Resident to be guaranteed by this Contract: _____
- 3. Relation of Resident to Co-Signer: _____
- 4. Monthly amount to be Guaranteed for the Term of the Lease (RENT) _____
- 5. Lease Start Date: August 1, 2009 _____
- 6. Lease End Date: July 31, 2010 _____

I (We), the person (People) named at the top of this application, do hereby guarantee full performance of the lease between TENANT stated above, residing in the above named apartment complex and Granwood Properties, Inc., LANDLORD, for the duration of the lease and **any lease renewals**.

Co-Signer's Signature Date (SEAL)

Spouse's Signature Date (SEAL)

I, _____, a notary public for _____
Notary Public's Name County State

Do hereby certify that _____ personally appeared before me on this day
Co-Signer (and Spouse) Name(s)
and acknowledge the due execution of the foregoing instrument.

Witness my hand and official seal this, the _____ day of _____, 20_____.

Notary Public's Signature

My Commission Expires: _____ (Notary's Seal)