

Spartan Crossing Apartments

Student Housing at its Best!

1911-A Spring Garden Street • Greensboro, NC 27403

Phone 336.273-0554 • Fax 336.273.0485

Application Process

Each student applicant must provide the following information for their application:

Signature on *Rental Scoring and Your Rental Application* form

Signature on *Application Process* form

Completed *Student Rental Application*

Completed *Roommate matching form*

Co-signers are required for each resident and must provide the following information:

Signature on *Rental Scoring and Your Rental Application* Form

Signature on *Application Process* form

Completed *Co-signer rental application*

Completed *Co-signer addendum to lease. THIS FORM MUST BE NOTARIZED.*

A form of *income verification* (pay stub, tax return, W-2, or have the provided

Employment Verification form filled out by your Supervisor)

A co-signer does not have to be related to the resident however, they must be 21 years of age or older and be able to provide all information for the co-signer application.

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, pay all fees, and have their application approved within this 2 week period, we will 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** must be paid along with a the completed application in order for your application to be processed.

◆ 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 **The Property, you are applying for. We do not accept cash.**

Applicant Signature

Date

Date

Cosigner Signature

Date

Cosigner Signature

Professionally managed by Emerson Property Management
This community is locally owned and operated.

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

Date

Co-signer Signature

Date

Co-signer Signature

SPARTAN CROSSING
STUDENT RENTAL APPLICATION
PLEASE ANSWER ALL QUESTIONS

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

Applicant's Name _____ Social Security
#: _____

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

Telephone #: (mobile) _____ (work)

Check One: _____ Freshman _____ Sophomore _____ Junior _____ Senior
_____ Grad

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

Current Address:

Name of Current Apartment Community or Dorm (if
applicable): _____

Home Address (when not @ school)

Student E-Mail Address:

Employed by: _____ Position/Title:

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

Supervisors Name: _____ Telephone
#: _____

Others who will occupy apartment (if known):

Name _____ Age _____

Relationship _____

Name _____ Age _____

Relationship _____

*Security Deposit in the sum of \$ _____ is made with the clear understanding that this application, including each prospective occupant, is subject to approval and acceptance. The applicant agrees to execute a lease and pay the prorated and/or first month's rent before possession is given. **The applicant has a maximum of three days within which to cancel this application in writing and have his/her security deposit (if applicable) 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 \$50.00 and the Administrative Fee of \$99.00 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 Emerson Property Management.

Applicant Signature
Date

ROOMMATE MATCHING

This MUST be filled out even if you know who your roommates will be.

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:

Apartment Size: _____ 2 Bdrm _____ 3 Bdrm

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

Area of Study: _____ Anticipated Graduation Date:

My Preference of Roommate Is: Male Female

Either

I Like to Keep My Room: Very Neat Somewhat Tidy

Untidy

I Would Describe Myself As: Very Quiet Average

Noisy

I Study: Often Average

Seldom

I Smoke (All apts are non-smoking): Yes No

Outside Only

I Drink: Often Average

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 or 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

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 #: _____

E-Mail Address:

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

Check one: Married Divorced Separated Single

Present

Address _____

Check one: Own home Rent Other

Name of Mortgage Company or Apartment

Community: _____

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

Monthly Rent or Mortgage payment: \$

Employed by: _____ Position/

Title: _____

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

Monthly/ Yearly

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 Emerson Property Management.

Applicant 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

CO-SIGNER ADDENDUM TO LEASE

Spartan Crossing

This portion of the application is the actual co-signer agreement for said lease at Spartan Crossing. This co-signer agreement is an addendum to the lease between Emerson Property Management 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 Emerson Property Management over the term of the lease. The resident(s) name, the rent, and lease term need to be filled in by you below in the appropriate spaces and 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...**336-273-0554**

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CO-SIGNER AGREEMENT TERMS:

BELOW:

- 1. Apartment Complex: _____ Spartan Crossing
*
- 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) \$499-\$545
*
- 5. Lease Start Date:
*
- 6. Lease End Date: _____ 7-31-2012
*

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 EMERSON PROPERTY MANAGEMENT, LANDLORD, for the duration of the lease and **any lease renewals.**

(SEAL)
Co-Signer's Signature _____ Date _____

(SEAL)
Co-Signer Signature _____ Date _____

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

Do hereby certify that _____ personally appeared
before me on _____ Co-Signer (and Spouse) Name(s)

this day 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: _____
Seal)

(Notary's

EMPLOYMENT/INCOME VERIFICATION Preferably a Paystub

This request for verification of employment or income information on the below reference individual is part of the application approval process for residency in an apartment community managed by Emerson Property Management

Property: _____ Spartan Crossing _____

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

I, _____ (_____)
Signature of Co- Signer **Printed Name of Co-Signer**

give permission for the information requested below to be released to Emerson Property Management for the purpose of application approval.

Company Name:

Applicant's position with
company: _____

Dates of employment: From: _____ To:

Rate of pay: \$ _____ Hourly Weekly Bi-weekly
Monthly Yearly

Average number of hours in work week: _____

Probability of continued employment: _____

*Name and title of person verifying information:

(Please print name)

(Please print title)

(Signature of person verifying information)

**This cannot be the co-signer.*

Please have this form filled out by your supervisor and fax to **336-273-0485**
or return with completed application.

You may also submit a copy of your most recent pay stub rather than using
this form. Thank You!