



Meridian Management Group

Thank you for your interest in our apartment.

Before you apply for the apartment, we would appreciate it if you would acknowledge the following important information.

We require a **deposit of \$ _____** payable by money order or cashier's check (no personal checks) made payable to _____ with your completed application, which will be applied to your first month's rent if accepted. If your application is rejected your deposit will be refunded to you in full. If you choose not to move into the property after submitting the application, but before you sign the lease, the deposit money will be forfeited to the property owner. Therefore, please do not submit an application unless you are sure you want the apartment.

In addition there is a **\$25.00 charge per person for verification of the application** made payable to _____. This is non-refundable and is comprised of a fee for a credit report with the balance being a fee to verify the information on the application. We will run credit reports and perform verification for each named applicant. You authorize Meridian Management Group to contact your employers, banks, personal references and your present and previous landlords. If we note anything negative we may reject your application, therefore, we suggest you provide a detailed explanation with your completed application.

The **security deposit** is \$ _____

and is due upon lease signing made payable to _____.
It is our goal to have the lease signed and all monies received within 3 days of acceptance of the application.

In order to qualify you must have good credit, receive acceptable references and have three times the monthly rent in gross income. In the event you have long term or high debt, you may be required to show additional income.

Our standard **lease term** is one year.

The application may take a couple business days to process, as this depends on response from others, such as the credit reporting agency, previous landlords, banks and employers.

If the application is accepted, the lease is to be executed at the agent's office ***within three (3) days*** after the applicant is notified of such acceptance.

If Owner is unable to deliver possession of the Premises at the commencement of the term, Owner shall not be liable for any damage caused thereby. Additionally, applicant shall not be liable for any rent until possession is delivered.

Meridian Management Group reserves the right to amend the above policies.

Meridian Management Group is committed to the United States policy for the achievement of **equal housing opportunities** throughout the country with no barriers to obtaining housing for any reason, including race, color, religion, sex, handicap, familial status or national origin.

Applicant has read this document and hereby acknowledges receipt of same.



EXPEDITE YOUR APPLICATION

If you are employed, you may submit the following for income verification:

- Your two most recent paycheck stubs.
- A signed copy of your employment contract.
- Your W-2 forms for the past two years.

If you are self employed, please submit:

- Your federal income tax statements for the past two years (please countersign in blue ink), and
- Signed year-to-date income/expense or profit/loss statement and a current balance sheet.

If you are including income from other sources other than employment, please submit:

- Two recent statements (or check stubs) showing the income for six or more months.
- Your 1099's from the past two years.
- Your federal income tax statements from the past two years showing the income.

If you do not meet our financial and credit criteria, you will need a guarantor in order to qualify for the apartment. The guarantor will need to provide the following:

- A signed application with the \$25.00 credit check fee per individual guarantor.
- The guarantor must have excellent credit.
- The guarantor's debts, including the rental, shall be no more than 1/3 of his/her income.
- The guarantor needs to show proof of personal income (copy of signed tax returns, W-2s, or two of the most recent paycheck stubs).
- The guarantor must reside in the United States of America.



Property _____; Unit # _____

City _____, CA, Zip _____

Rent Amount \$ _____

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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 or ITIN	
Other names used in the last 10 years				Work phone number ()		Home phone number ()	
Date of birth		E-mail address				Mobile/Cell phone number ()	
Photo ID/Type		Number		Issuing government		Exp. date	Other ID

1. Present address			City		State		Zip
Date in		Date out		Owner/Agent Name		Owner/Agent Phone number	
Reason for moving out						Current rent \$ /Month	

2. Previous address			City		State		Zip
Date in		Date out		Owner/Agent Name		Owner/Agent Phone number	
Reason for moving out							

3. Next previous address			City		State		Zip
Date in		Date out		Owner/Agent Name		Owner/Agent Phone number	
Reason for moving out							

Proposed Occupant: List all in addition to yourself	Name		Name	
	Name		Name	
	Name		Name	

Do you have pets?	Describe
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How did you hear about this rental?

A. Current Employer Name		Job Title or Position		Dates of Employment	
Employer address			Employer/Human Resources phone number ()		
City, State, Zip			Name of your supervisor/human resources manager		

Current gross income		Check one	
\$		Per <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year	

B. Prior Employer Name		Job Title or Position		Dates of Employment	
Employer address			Employer/Human Resources phone number ()		
City, State, Zip			Name of your supervisor/human resources manager		

Other income source _____		Amount \$ _____		Frequency _____	
Other income source _____		Amount \$ _____		Frequency _____	

APPLICANT VERIFICATION

PROPERTY _____

APPLICANT _____

PREPARED BY _____

CO-APPLICANT _____

DATE _____

Question	Applicant	Co-Applicant
Current Landlord Information:		
1. Name of person contacted?		
2. What is the address of the property?		
3. Current rent amount?		
4. Rent paid on time?		
5. If late, how often?		
6. Any 3/30-day notices served?		
7. If so, reason?		
8. Has resident given 30-day notice?		
9. Any behavior problems with resident?		
10. Any maintenance problems caused by resident?		
11. Would you rent to this person again?		
Prior Landlord Information:		
1. Name of person contacted?		
2. What is the address of the property?		
3. Last rent amount paid?		
4. Rent paid on time?		
5. If late, how often?		
6. Any 3/30-day notices served?		
7. If so, reason?		
8. Did resident give 30-day notice?		
9. Any behavior problems with resident?		
10. Any maintenance problems caused by resident?		
11. What was the condition of the unit when vacated?		
12. Would you rent to this person again?		
Income/Employment:		
1. Employer (or source of income)?		
2. Name of person contacted?		
3. Title?		
4. How long applicant employed?		
5. Current position?		
6. Salary (hr, wk, mo, yr)?		
Bank Account:		
1. Date opened?		
2. Rating?		
Credit Rating:		
1. Credit agency name?		
2. Overall rating/date given?		
3. Hard copy requested/date?		



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VERIFICATION OF INCOME / EMPLOYMENT

To Whom It May Concern:

Your employee has applied to rent an apartment from us at _____.
Building's Address

It would be appreciated if you would complete this short questionnaire and fax it to _____.
Fax Number

Applicant's Name _____

Address: _____

[Above, to be filled by the Resident Manager.]

[Below, to be filled by the Employer.]

Name of Employer (or Source of Income): _____

How long has applicant been employed by your company? _____

What is the applicant's current position? _____

What is the applicant's salary (hourly, weekly, monthly, yearly)? \$ _____ per _____

NAME OF PERSON COMPLETING THIS FORM: _____

TITLE OF PERSON COMPLETING THIS FORM: _____

Signature: _____ Date: _____



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VERIFICATION OF TENANCY

To Whom It May Concern:

Your tenant has applied to rent an apartment from us at _____.
Building's Address

It would be appreciated if you would complete this short questionnaire and fax it to _____.
Fax Number

Applicant's Name _____

Address: _____

[Above, to be filled by the Resident Manager.]

[Below, to be filled by the Landlord.]

Current Monthly Rent Amount: _____ No. of Persons on Lease: _____

Is the rent paid on time? _____ If late, how often? _____

Any 3 or 30-Day Notices Served? _____

If so, reason: _____

Has tenant given you a 30-Day Notice to Vacate? _____

Any behavioral or maintenance problems with tenant? _____

Would you rent to this person again? _____

NAME OF PERSON COMPLETING THIS FORM: _____

TITLE OF PERSON COMPLETING THIS FORM: _____

Signature: _____

Date: _____