



Conventional Application Checklist

Please include the following to complete your application process:

1. Deposit
 - a. One check/money order/certified fund, payable to Masonvale in the amount of \$250
2. Application fee
 - a. Second check/money order/ certified fund, payable to Masonvale in the amount \$50/person
3. Completed Masonvale application
 - a. Includes grounds for denial
 - b. If applicable, supplemental application, (Non-US citizens)
 - c. Three years resident history (all mailing addresses/dorms)
4. Government issued photo identification
 - a. Include Driver's License, passport, I-94, Visa, I-20 etc (if applicable)
5. Proof of income, if applicable (see attached acceptable proof of income)
6. Guarantor application if proof of income is not provided for resident. Guarantor must be US citizen and must have 34% of their monthly income cover the rent each month.
 - a. Separate check/certified fund, payable to Masonvale in the amount \$25 for guarantor fee
 - b. Proof of income, for guarantor (see attached acceptable proof of income)
 - c. Government issued photo identification, for guarantor
 - d. Grounds for Denial

You may drop application off at the Leasing Office or mail it to:

Masonvale
4350 Staffordshire Lane,
Fairfax, VA 22030



Proof of Income

33% of monthly income must cover monthly rent

- **Self Employed-**
 - Letter on official letterhead from CPA/Accountant or
 - Last years personal tax return signed by client or
 - If not filed yet, tax return from 2 years prior with copies of last years estimated tax worksheet on form 1040-es
- **Retired-**
 - Documentation from CPA or
 - Last years personal tax return or
 - Proof of social security income or
 - Proof of retirement income
- **Child Support or Alimony-**
 - Copy of divorce decree signed by judge or
 - Copy of letter of award from Attorney General's office
- **To use Bank Account-**
 - Must provide copy of most recent bank account (within 60 days) Statement
 - Statement must show enough money to cover entire lease term at market rent (i.e. \$1750/mo, 12 month lease, bank account must show \$21,000)
 - Statement must be from U.S. Bank and funds must be U.S. funds
 - Cannot use 401(k)
- **To use Offer Letter-**
 - May only be used if you have not been at the job long enough to receive paycheck (Not to exceed 60 days from move in)
 - Must be on Company Letterhead
 - Must be signed by officer of Company
 - Must show how much you make and how often that amount will be paid (i.e. hourly, yearly, etc)
 - If letter contains contingencies, letter may not be used
- **To Income Verification letter from Employer –**
 - Must be on Company letter head
 - Must state your name and position with GMU
 - Must state how much you make and how often
 - Must be signed and notarized by officer of Company
- **To use Student Loans/Grants-**
 - Must be statement from GMU Financial Aid showing total amount of Aid provided.
 - If from 3rd party company, must be U.S. company and must provide offer statement. If using letter written by officer of company, must be on company letter head, signed and notarized by officer
- **To use Income with no provable income source (i.e. babysitting or contract labor)-**
 - Must provide notarized letters from all individuals
 - Must be dated and state monthly amount paid
- **To use Paystubs-**
 - 2 most recent paystubs within last 60 days (must be employed for at least 3 months)
- **To use Most Previous Tax Return-**
 - We do not accept W2 we actually need to see the page that shows your gross income for the previous year

* If you are unable to provide proper proof of income and you are otherwise approved, you may be offered to pay 1 month addition rent as a security deposit (refundable upon move-out, less damages) or you may be offered to have a guarantor, depending on conditions of approval.

Rental Application for Residents and Occupants

*Each co-applicant and each occupant 18 years old and over must submit a separate application.
Spouses may submit a single application.*



Date when filled out: _____

<p>ABOUT YOU Full name (exactly as on driver's license or govt. ID card) _____</p> <p>Your street address (as shown on your driver's license or government ID card): _____</p> <p>Driver's license # and state: _____ OR govt. photo ID card #: _____</p> <p>Former last names (maiden and married): _____</p> <p>Your Social Security #: _____</p> <p>Birthdate: _____ Height: _____ Weight: _____</p> <p>Sex: _____ Eye color: _____</p> <p>Marital Status: <input type="checkbox"/> single <input type="checkbox"/> married <input type="checkbox"/> divorced <input type="checkbox"/> widowed <input type="checkbox"/> separated</p> <p>Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you or any occupant smoke? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Will you or any occupant have an animal? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Kind, weight, breed, age: _____</p> <hr/> <p>Current home address (where you now live): _____</p> <p>City/State/Zip: _____</p> <p>Home/cell phone: _____ Current rent: \$ _____</p> <p>Email address: _____</p> <p>Name of apartment where you now live: _____</p> <p>Current owner or manager's name: _____</p> <p>Their phone: _____ Date moved in: _____</p> <p>Why are you leaving your current residence? _____</p> <hr/> <p>Your previous home address: _____</p> <p>City/State/Zip: _____</p> <p>Apartment name: _____</p> <p>Name of above owner or manager: _____</p> <p>Their phone: _____ Previous monthly rent: \$ _____</p> <p>Date you moved in: _____ Date you moved out: _____</p>	<p>YOUR RENTAL/CRIMINAL HISTORY Check only if applicable. Have you, your spouse, or any occupant listed in this Application ever: <input type="checkbox"/> been evicted or asked to move out? <input type="checkbox"/> moved out of a dwelling before the end of the lease term without the owner's consent? <input type="checkbox"/> declared bankruptcy? <input type="checkbox"/> been sued for rent? <input type="checkbox"/> been sued for property damage? <input type="checkbox"/> been charged, detained, or arrested for a felony, misdemeanor involving a controlled substance, violence to another person or destruction of property, or a sex crime that was resolved by conviction, probation, deferred adjudication, court ordered community supervision, or pretrial diversion? <input type="checkbox"/> been charged, detained, or arrested for a felony, misdemeanor involving a controlled substance, violence to another person or destruction of property, or a sex crime that has not been resolved by any method? Please indicate below the year, location and type of each felony, misdemeanor involving a controlled substance, violence to another person or destruction of property, or sex crime other than those resolved by dismissal or acquittal. We may need to discuss more facts before making a decision. <i>You represent the answers is "no" to any item not checked above.</i></p> <hr/> <p>YOUR SPOUSE Full name: _____</p> <p>Former last names (maiden and married): _____</p> <p>Spouse's Social Security #: _____</p> <p>Driver's license # and state: _____ OR govt. photo ID card #: _____</p> <p>Birthdate: _____ Height: _____ Weight: _____</p> <p>Sex: _____ Eye color: _____</p> <p>Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Present employer: _____</p> <p>Address: _____</p> <p>City/State/Zip: _____</p> <p>Work phone: _____</p> <p>Position: _____</p> <p>Date began job: _____ Gross annual income is over: \$ _____</p> <p>Supervisor's name and phone: _____</p>
<p>YOUR WORK Present employer: _____</p> <p>Address: _____</p> <p>City/State/Zip: _____</p> <p>Work phone: _____</p> <p>Position: _____</p> <p>Your gross annual income is over: \$ _____</p> <p>Date you began this job: _____</p> <p>Supervisor's name and phone: _____</p> <hr/> <p>Previous employer: _____</p> <p>Address: _____</p> <p>City/State/Zip: _____</p> <p>Work phone: _____</p> <p>Position: _____</p> <p>Gross annual income was over: \$ _____</p> <p>Dates you began and ended this job: _____</p> <p>Previous supervisor's name and phone: _____</p>	<p>OTHER OCCUPANTS Names of all persons under 18 and other adults who will occupy the unit without signing the lease. Continue on separate page if more than three.</p> <p>Name: _____ Relationship: _____</p> <p>Sex: _____ DL or govt. ID card _____ & State: _____</p> <p>Birthdate: _____ Social Security #: _____</p> <p>Name: _____ Relationship: _____</p> <p>Sex: _____ DL or govt. ID card _____ & State: _____</p> <p>Birthdate: _____ Social Security #: _____</p> <p>Name: _____ Relationship: _____</p> <p>Sex: _____ DL or govt. ID card _____ & State: _____</p> <p>Birthdate: _____ Social Security #: _____</p>
<p>YOUR CREDIT HISTORY Your bank's name, city, state: _____</p> <p>List major credit cards: _____</p> <p>Other non-work income you want considered. Please explain: _____</p> <p>Past credit problems you want to explain. (Use separate page.)</p>	<p>YOUR VEHICLES List all vehicles owned or operated by you, your spouse, or any occupants (including cars, trucks, motorcycles, trailers, etc.). Continue on separate page if more than three.</p> <p>Make and color of vehicle: _____</p> <p>Year: _____ License #: _____ State: _____</p> <p>Make and color of vehicle: _____</p> <p>Year: _____ License #: _____ State: _____</p> <p>Make and color of vehicle: _____</p> <p>Year: _____ License #: _____ State: _____</p>
<p>WHY YOU APPLIED HERE Were you referred? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, by whom:</p> <p>Name of locator or rental agency: _____</p> <p>Name of individual locator or agent: _____</p> <p>Name of friend or other person: _____</p> <p>Did you find us on your own? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, fill in information below:</p> <p><input type="checkbox"/> On the Internet <input type="checkbox"/> Stopped by <input type="checkbox"/> Newspaper (name): _____</p> <p><input type="checkbox"/> Rental publication: _____</p> <p><input type="checkbox"/> Other: _____</p>	<p>EMERGENCY Emergency contact person over 18, who will not be living with you:</p> <p>Name: _____</p> <p>Address: _____</p> <p>City/State/Zip: _____</p> <p>Work phone: _____ Home phone: _____</p> <p>Relationship: _____</p> <hr/> <p>AUTHORIZATION I or we authorize (owner's name) <u>Mason Housing, Inc.</u> to obtain reports from any consumer or criminal record reporting agencies before, during, and after tenancy on matters relating to a lease by the above owner to me and to verify, by all available means, the information in this application, including criminal background information, income history and other information reported by employer(s) to any state employment security agency. Work history information may be used only for this Rental Application. Authority to obtain work history information expires 365 days from the date of this Application.</p> <p>Applicant's signature _____</p> <p>Spouse's signature _____</p> <p style="text-align: center;"><i>Applicant must also sign on the next page of this Application.</i></p>

Contemplated Lease Contract Information

To be filled in only if the Lease Contract is not signed by resident(s) at time of application for rental.

The National Apartment Association Lease Contract to be used must be the latest version published by the association unless an earlier version is initialed by resident(s) and attached to this Application. The blanks in the Lease Contract will contain the following information:

- Names of all residents who will sign Lease Contract _____
- Name of Owner/Lessor Mason Housing, Inc.
- Property name and type of dwelling (bedrooms and baths) _____
- Complete street address _____
City/State/Zip _____
- Names of all other occupants not signing Lease Contract (persons under age 18, relatives, friends, etc.) _____
- Total number of residents and occupants _____
- Beginning date and ending date of Lease Contract _____
- Total security deposit \$ _____; Animal deposit \$ _____
- Other fees \$ _____
- Total monthly rent for dwelling unit \$ _____
- Rent to be paid at (check one) on-site manager's office or at _____
- Prorated rent for: first month or second month \$ _____
- Monthly rental due date _____
- Late charges due if rent is not paid on or before the _____
- Initial late charge \$ _____; Daily late charge \$ _____
- Returned-check charge \$ _____
- (Check one): furnished or unfurnished;
- Utilities paid by owner (check all that apply): electricity, gas, water, wastewater, trash, cable TV, master TV antenna;
- You are (check one): required to purchase personal liability insurance or not required to purchase personal liability insurance;
- Agreed reletting charge \$ _____
- Special provisions regarding parking, storage, etc.: (see attached page if necessary): _____

Application Agreement

1. **Lease Contract Information.** The Lease Contract contemplated by the parties is attached—or, if no Lease Contract is attached, the Lease Contract will be the current Lease Contract. Special information and conditions must be explicitly noted on an attached Lease Contract or in the Contemplated Lease Contract Information above.
2. **Application Fee (nonrefundable).** You have delivered to our representative an application fee in the amount indicated below, and this payment partially defrays the cost of administrative paperwork. It's nonrefundable except as provided by applicable law.
3. **Application Deposit.** In addition to any application fee, you have delivered to our representative an application deposit in the amount indicated below. The application deposit is not a security deposit. To the extent permitted by applicable law, it will be credited toward the required security deposit when the Lease Contract has been signed by all parties; OR it will be refunded under paragraph 10 if you are not approved; OR it will be retained by us as liquidated damages if you fail to sign or attempt to withdraw under paragraph 6 or 7.
4. **Approval When Lease Contract Is Signed in Advance.** If you and all co-applicants have already signed the Lease Contract when we approve the Application, our representative will notify you (or one of you if there are co-applicants) of our approval, sign the Lease Contract, and then credit the application deposit of all applicants toward the required security deposit.
5. **Approval When Lease Contract Isn't Yet Signed.** If you and all co-applicants have not signed the Lease Contract when we approve the Application, our representative will notify you (or one of you if there are co-applicants) of the approval, sign the Lease Contract when you and all co-applicants have signed, and then credit the application deposit of all applicants toward the required security deposit.
6. **If You Fail to Sign Lease Contract After Approval.** Unless we authorize otherwise in writing, you and all co-applicants must sign the Lease Contract within 3 days after we give you our approval in person or by telephone or within 5 days after we mail you our approval. If you or any co-applicant fails to sign as required, we may keep the application deposit as liquidated damages, to the extent permitted by applicable law, and terminate all further obligations under this Agreement. Our actions under this paragraph shall comply with Virginia Code Ann. 55-248.6:1.
7. **If You Withdraw Before Approval.** You and any co-applicant may not withdraw your application or the application deposit. To the extent permitted by applicable law, if you or any co-applicant withdraws an Application or notifies us that you've changed your mind about renting the dwelling unit, we'll be entitled to retain all application deposits as liquidated damages, and the parties will then have no further obligation to each other. Our actions under this paragraph shall comply with Virginia Code Ann. 55-248.6:1.
8. **Completed Application.** An Application will not be considered "completed" and will not be processed until all of the following have been provided to us (unless checked): a separate Application has been fully filled out and signed by you and each co-applicant; an application fee has been paid to us; an application deposit has been paid to us. If no item is checked, all are necessary for the Application to be considered completed.
9. **Non-approval.** We will notify you whether you've been approved within 10 days after the date we receive a completed Application. Your Application will be considered "disapproved" if we fail to notify you of your approval within 10 days after we have received a completed Application. Notification may be in person or by mail or telephone unless you have requested that notification be by mail. You must not assume approval until you receive actual notice of approval. The 10-day time period may be changed only by separate written agreement.
10. **Refund after Non-approval.** If you or any co-applicant is disapproved or deemed disapproved under paragraph 9, we'll refund all application deposits in accord with Virginia Code Ann. 55-248.6:1. Refund checks may be made payable to all co-applicants and mailed to one applicant.
11. **Extension of Deadlines.** If the deadline for signing, approving, or refunding under paragraphs 6, 9, or 10 falls on a Saturday, Sunday, or a state or federal holiday, the deadline will be extended to the end of the next day.
12. **Notice to or from Co-applicants.** Any notice we give you or your co-applicant is considered notice to all co-applicants; and any notice from you or your co-applicant is considered notice from all co-applicants.
13. **Keys or Access Devices.** We'll furnish keys and/or access devices only after: (1) all parties have signed the contemplated Lease Contract and other rental documents referred to in the Lease Contract; and (2) all applicable rents and security deposits have been paid in full.
14. **Receipt.** Application fee (may or may not be refundable): \$ _____
Application deposit (may or may not be refundable): \$ _____
Other move-in fees (may or may not be refundable): \$ _____
Total of above application fee and application deposit: \$ _____
Total amount of money we've received to this date: \$ _____
15. **Signature.** Our representative's signature is consent only to this Application Agreement. It does not bind us to accept applicant or to sign the proposed Lease Contract.

Acknowledgment. You declare that all your statements in this Application are true and complete. You authorize us to verify same through any means. If you fail to answer any question or give false information, we may reject the application, retain all application fees and deposits as liquidated damages for our time and expense, and terminate your right of occupancy. Giving false information is a serious criminal offense. In lawsuits relating to the application or Lease Contract, the prevailing party may recover all attorney's fees and litigation costs from the losing party. We may at any time furnish information to consumer reporting agencies and other rental housing owners regarding your performance of your legal obligations, including both favorable and unfavorable information about your compliance with the Lease Contract, the rules, and financial obligations.

If you're seriously ill or injured, what doctor may we notify? (We're not responsible for providing medical information to or calling doctors or emergency personnel.)
 Doctor's name: _____ Doctor's phone: (____) _____

Important medical information about you in an emergency: _____
 Applicant's Signature: _____ Date: _____
 Signature of Spouse: _____ Date: _____
 Signature of Owner's Representative: _____ Date: _____

FOR OFFICE USE ONLY	
1. Apt. name or dwelling address (street, city): <u>Mason Housing, Inc.</u>	
2. Person accepting application: _____	Unit # or type: _____
3. Person processing application: _____	Phone: (____) _____
4. Date that applicant or co-applicant was notified by <input type="checkbox"/> telephone, <input type="checkbox"/> letter, or <input type="checkbox"/> in person of <input type="checkbox"/> acceptance or <input type="checkbox"/> nonacceptance: _____	Phone: (____) _____
(Deadline for applicant and all co-applicants to sign lease is three days after notification of acceptance in person or by telephone, five days if by mail.)	
5. Name of person(s) who were notified (at least one applicant must be notified if multiple applicants): _____	
6. Name of owner's representative who notified above person(s): _____	



APPLICATION CRITERIA

All applicants for residency will be processed through a credit-reporting agency. All adults 18 years of age or older, or emancipated minors with written proof of emancipation, must complete and sign an application. Lincoln does not discriminate on the basis of race, color, religion, sex, familial status, national origin, handicap, or any other protected class recognized under applicable federal, state and/or local law. Provided, however, if the property has been designated as a senior community: (i) the community is exempt from familial status discrimination under federal law; (ii) the community is intended to qualify as housing for older persons pursuant to the federal Fair Housing Act; and (iii) at least 80% of the community's occupied units will be occupied by at least 1 person 55 years of age or older.¹

In reviewing the application, the following criteria will be used to determine the applicant's suitability for residency.²

1. CREDIT

All credit status for the last two (2) years will be checked through the appropriate Credit Bureau. A minimum credit score of 550 is required. Lincoln will make an exception to the minimum credit score requirement of 550 for applicants with a "0" credit score, if such score is solely a result of insufficient credit information to generate a credit score and not based on any negative credit history. If allowed by applicable law, exceptions to the minimum credit score requirement will also be made upon (i) an applicant providing a guarantor/co-signor for the lease that meets all credit requirements, or (ii) an applicant providing an additional deposit in the amount of one times (1x) the expected monthly rental amount.

2. RESIDENCE OR RENTAL HISTORY

The last two (2) years residence or rental history is required. All appropriate phone numbers and addresses, and where this information may be VERIFIED, must appear on the occupancy application. *The credit report and other sources of rental history will be checked to verify resident and rental history information.* Applicants with a rental history reflecting four (4) or more NSF checks received within the relevant two (2) year period will be denied. In addition, all resident rental history within the relevant two (2) year period must be free of rental housing evictions and landlord debt in excess of \$1,500 or the application will be denied. Applicants with a history of landlord debt in an amount less than \$1,500 will be approved upon providing sufficient proof of payment of, or release from, such outstanding debt and payment of an additional deposit, if allowed by law, in the amount of one times (1x) the expected monthly rental amount.

3. INCOME

Applicant's income will be verified. Management will accept any legal, verifiable source of income paid directly to the applicant or a representative of the applicant. Legal sources of income include, but are not limited to, the following: employment income, retirement benefits, spousal/child support, I20s, savings accounts, welfare, Social Security disability benefits, housing choice vouchers, or any other legal, verifiable source of income. Monthly rent cannot exceed 35% of total gross monthly income for approved applicant(s). If the property participates in the section 8 housing program, income requirements will apply to the household's share of the monthly rent. If allowed by applicable law, exceptions to the percentage of gross monthly income requirement will be made only upon (i) an applicant providing a guarantor/co-signor for the lease that meets all credit requirements and for whom the monthly rental amount does not exceed 20% of their total gross monthly income, or (ii) an applicant providing an additional deposit in the amount of the household's share of the expected monthly rental amount.

¹ For senior communities, any of the following documents are considered reliable documentation of the age of occupants residing in a unit: (i) driver's license; (ii) birth certificate; (iii) passport; (iv) immigration card; (v) military identification; (vi) any other state, local, national or international official documents containing a birthdate of comparable liability; or (vii) a certification in a lease, application, affidavit or other document signed by any member of the household age 18 or older asserting that at least 1 person in the unit is 55 years of age or older.

² These criteria do not constitute a representation or warranty that everyone residing within the community meets the requirements. For example, there may be persons who have resided within the community since before these criteria were established. In addition, Lincoln's ability to confirm compliance with the represented criteria is limited to the various credit reporting services used. Lincoln also has an appeals process by which applicants may provide evidence of circumstances to mitigate negative criminal activity and seek exception after individualized review and assessment.

4. CRIMINAL HISTORY

The criminal records of all household members over the age of 18 will be checked and reviewed for certain felony and Class A misdemeanor offenses. The information gathered as the result of this check would affect the approval of the application as follows:

A. Applicants with any of the following felony convictions (or similarly classified offenses in jurisdictions outside of Texas) in the twenty (20) year period preceding the date of application will be denied approval: murder, capital murder, aggravated kidnapping, sexual assault, aggravated sexual assault, indecency with a child, sexual performance by child, first degree criminal solicitation, compelling prostitution, trafficking of persons, aggravated robbery, burglary if committed with the intent to commit felony sexual assault, aggravated sexual assault, sexual abuse of a child, or prohibited sexual conduct, offenses under Section 481.134(c), (d), (e) or (f) of the Texas Health and Safety Code (or, such applicable state law, if allowed by law) if it is shown that the offender has been previously convicted of an offense for which punishment was increased under the aforementioned sections, offenses under Section 481.140 of the Texas Health and Safety Code (or similarly classified offenses in jurisdictions outside of Texas) relating to any felony conviction increased in punishment as a result of use of a child in commission of such offenses, and any offense where the offender used or exhibited a deadly weapon during the commission of a felony offense or during immediate flight therefrom.

B. Applicants will be automatically denied for any prior conviction for manufacturing or distribution of a controlled substance (or similarly classified offenses in jurisdictions outside of Texas).

C. Applicants will be automatically denied if they are currently subject to a registration requirement under Article 62.001, Code of Criminal Procedure, Sex Offender Registration Program (or similar Sex Offender Registration Programs in jurisdictions outside of Texas).

D. Any other felony or Class A misdemeanor conviction other than those set forth in 4.A. above related to violent criminal activity (or similarly classified offenses in jurisdictions outside of Texas) will result in denial if the conviction occurred in the seven (7) year period preceding the date of application.

E. Any conviction of Theft under Texas Penal Code Sections 31.03 (as defined by 31.06) or 31.04 related to Theft by Check or Theft of Services (or similarly classified offenses in jurisdictions outside of Texas) in the three (3) year period preceding the date of application will result in conditional approval and, if allowed by law, require the applicant to agree to pay all amounts due and payable by applicant within the initial lease term (including all rental payments, deposits, and other lease charges) with certified funds.

F. Notwithstanding the above, any applicant may provide documentation disputing the negative criminal activity or provide evidence of circumstances that mitigates the negative criminal activity. Any request for reconsideration of a denial of tenancy due to criminal activity shall be submitted within fifteen (15) calendar days of such denial and management shall make a determination, within twenty-one (21) calendar days thereafter, as to whether to uphold the denial of tenancy.

G. Failure to accurately report any criminal activity constitutes a non-curable material falsification and is grounds for termination of tenancy regardless of when such material falsification is discovered.

5. NON U.S. CITIZENS

Non-U.S. Citizens must be able to provide documentation from U.S. Immigration to verify legal residency in the United States as of the effective date of the lease agreement.

6. OCCUPANCY POLICY

A maximum of two persons per bedroom plus a child under two (2) years old will be allowed to occupy a unit or as may be restricted by applicable state or municipal code.

PLEASE TAKE YOUR TIME AND FILL OUT YOUR APPLICATION THOROUGHLY TO ENSURE TIMELY PROCESSING. FAILURE TO PROVIDE REQUESTED INFORMATION WILL RESULT IN DENIAL OF THE APPLICATION.

Signing this acknowledgment indicates that you have had the opportunity to review the landlord's resident selection criteria. The resident selection criteria include factors such as criminal history, credit history, current income and rental history. If you do not meet the selection criteria, or if you provide inaccurate or incomplete information, your application may be rejected and your application fee will not be refunded.

Applicant Signature

Date: _____

Applicant Signature

Date: _____

Applicant Signature

Date: _____





Supplemental Rental Application for Non-U.S. Citizens

Each co-resident and each occupant 18 years old and over who is not a U.S. citizen must submit a separate application. Spouses may submit a joint application.

We are requesting you to fill out this Supplemental Rental Application because you have indicated that you are not a U.S. citizen. We are asking all applicants who are not U.S. citizens to fill out this form. We are committed to compliance with fair housing laws and do not discriminate based on race, color, religion, sex, national origin, handicap, elderliness, or familial status. The purpose of this form is:

1. to give you the option to furnish information about an emergency contact person for you in your home country;
2. to verify that you are lawfully in the United States;
3. to determine whether your right to be in the U.S. expires during your Lease Contract term, and
4. to enable us to better cooperate with government officials in the performance of their duties, when requested.

We don't anticipate sharing this Supplemental Application with anyone except government officials who might inquire about you.

ABOUT YOU	YOUR SPOUSE
Your full name (exactly as on any card or document issued by U.S. Immigration and Naturalization Service): _____	Your full name (exactly as on any card or document issued by U.S. Immigration and Naturalization Service): _____
Your place of birth. Please indicate the city, state (region, province, etc.) and country: _____	Your place of birth. Please indicate the city, state (region, province, etc.) and country: _____
Country or countries of which you are a citizen (list all): _____	Country or countries of which you are a citizen (list all): _____
Approximately how long have you been in the United States? Years: _____ Months: _____	Approximately how long have you been in the United States? Years: _____ Months: _____
Have you ever been asked or ordered by a representative of any government to leave the U.S. or any other country? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please state when and what country or countries (list all): _____	Have you ever been asked or ordered by a representative of any government to leave the U.S. or any other country? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please state when and what country or countries (list all): _____
Person in your home country whom we may contact in event of an emergency (optional). Name: _____ Relationship: _____ Mailing address: _____	Person in your home country whom we may contact in event of an emergency (optional). Name: _____ Relationship: _____ Mailing address: _____
Email address: _____ Phone: _____	Email address: _____ Phone: _____
Please check the U.S. Immigration and Naturalization Service (INS) document that entitles you to be in the United States:	Please check the U.S. Immigration and Naturalization Service (INS) document that entitles you to be in the United States:
<input type="checkbox"/> Form I-551 Permanent Resident Card (Alien Registration Receipt Card) (form includes photo and fingerprint). Card number: _____	<input type="checkbox"/> Form I-551 Permanent Resident Card (Alien Registration Receipt Card) (form includes photo and fingerprint). Card number: _____
<input type="checkbox"/> Form I-766 Temporary Resident Card (form includes photo and fingerprint). Expiration date: _____ Card number: _____	<input type="checkbox"/> Form I-766 Temporary Resident Card (form includes photo and fingerprint). Expiration date: _____ Card number: _____
<input type="checkbox"/> Form I-766A Employment Authorization Card (form includes photo and fingerprint). Expiration date: _____ Card number: _____	<input type="checkbox"/> Form I-766A Employment Authorization Card (form includes photo and fingerprint). Expiration date: _____ Card number: _____
<input type="checkbox"/> Form I-94 Arrival-Departure Record (form does not include photo or fingerprint). Expiration date: _____ Form Number: _____	<input type="checkbox"/> Form I-94 Arrival-Departure Record (form does not include photo or fingerprint). Expiration date: _____ Form Number: _____
<input type="checkbox"/> INS receipt for replacement of one of the above documents, with verification by INS of your entitlement to the above.	<input type="checkbox"/> INS receipt for replacement of one of the above documents, with verification by INS of your entitlement to the above.
If you are relying on Form I-94, we will ask to see your passport and visa, and you will need to answer the questions below:	If you are relying on Form I-94, we will ask to see your passport and visa, and you will need to answer the questions below:
Country issuing your passport: _____	Country issuing your passport: _____
Your passport number: _____	Your passport number: _____
Expiration date: _____	Expiration date: _____
Do you have a visa? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have a visa? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, what type? <input type="checkbox"/> student <input type="checkbox"/> work <input type="checkbox"/> visitor <input type="checkbox"/> other (specify): _____	If yes, what type? <input type="checkbox"/> student <input type="checkbox"/> work <input type="checkbox"/> visitor <input type="checkbox"/> other (specify): _____
Visa expiration date: _____	Visa expiration date: _____

We may ask to make a photocopy of any of the INS documents checked above and, if needed, your passport and visa.

Applicant's signature _____
Spouse's signature _____
Date _____

OTHER OCCUPANTS AND RESIDENTS
Names of all persons under 18 and other adults who will occupy the unit.

<p>OTHER OCCUPANT/RESIDENT Your full name (exactly as on any card or document issued by U.S. Immigration and Naturalization Service): _____</p> <p>_____</p> <p>Your place of birth. Please indicate the city, state (region, province, etc.) and country: _____</p> <p>_____</p> <p>Country or countries of which you are a citizen (list all): _____</p> <p>_____</p> <p>Approximately how long have you been in the United States? Years: _____ Months: _____</p> <p>Have you ever been asked or ordered by a representative of any government to leave the U.S. or any other country? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please state when and what country or countries (list all): _____</p> <p>_____</p> <p>Person in your home country whom we may contact in event of an emergency (optional). Name: _____ Relationship: _____ Mailing address: _____ Email address: _____ Phone: _____</p> <p>Please check the U.S. Immigration and Naturalization Service (INS) document that entitles you to be in the United States:</p> <p><input type="checkbox"/> Form I-551 Permanent Resident Card (Alien Registration Receipt Card) (form includes photo and fingerprint). Card number: _____</p> <p><input type="checkbox"/> Form I-766 Temporary Resident Card (form includes photo and fingerprint). Expiration date: _____ Card number: _____</p> <p><input type="checkbox"/> Form I-766A Employment Authorization Card (form includes photo and fingerprint). Expiration date: _____ Card number: _____</p> <p><input type="checkbox"/> Form I-94 Arrival-Departure Record (form does not include photo or fingerprint). Expiration date: _____ Form Number: _____</p> <p><input type="checkbox"/> INS receipt for replacement of one of the above documents, with verification by INS of your entitlement to the above.</p> <p><i>If you are relying on Form I-94, we will ask to see your passport and visa, and you will need to answer the questions below.</i></p> <p>Country issuing your passport: _____ Your passport number: _____ Expiration date: _____</p> <p>Do you have a visa? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what type? <input type="checkbox"/> student <input type="checkbox"/> work <input type="checkbox"/> visitor <input type="checkbox"/> other (specify): _____</p> <p>_____</p> <p>Visa expiration date: _____</p>	<p>OTHER OCCUPANT/RESIDENT Your full name (exactly as on any card or document issued by U.S. Immigration and Naturalization Service): _____</p> <p>_____</p> <p>Your place of birth. Please indicate the city, state (region, province, etc.) and country: _____</p> <p>_____</p> <p>Country or countries of which you are a citizen (list all): _____</p> <p>_____</p> <p>Approximately how long have you been in the United States? Years: _____ Months: _____</p> <p>Have you ever been asked or ordered by a representative of any government to leave the U.S. or any other country? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please state when and what country or countries (list all): _____</p> <p>_____</p> <p>Person in your home country whom we may contact in event of an emergency (optional). Name: _____ Relationship: _____ Mailing address: _____ Email address: _____ Phone: _____</p> <p>Please check the U.S. Immigration and Naturalization Service (INS) document that entitles you to be in the United States:</p> <p><input type="checkbox"/> Form I-551 Permanent Resident Card (Alien Registration Receipt Card) (form includes photo and fingerprint). Card number: _____</p> <p><input type="checkbox"/> Form I-766 Temporary Resident Card (form includes photo and fingerprint). Expiration date: _____ Card number: _____</p> <p><input type="checkbox"/> Form I-766A Employment Authorization Card (form includes photo and fingerprint). Expiration date: _____ Card number: _____</p> <p><input type="checkbox"/> Form I-94 Arrival-Departure Record (form does not include photo or fingerprint). Expiration date: _____ Form Number: _____</p> <p><input type="checkbox"/> INS receipt for replacement of one of the above documents, with verification by INS of your entitlement to the above.</p> <p><i>If you are relying on Form I-94, we will ask to see your passport and visa, and you will need to answer the questions below.</i></p> <p>Country issuing your passport: _____ Your passport number: _____ Expiration date: _____</p> <p>Do you have a visa? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what type? <input type="checkbox"/> student <input type="checkbox"/> work <input type="checkbox"/> visitor <input type="checkbox"/> other (specify): _____</p> <p>_____</p> <p>Visa expiration date: _____</p>
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We may ask to make a photocopy of any of the INS documents checked above and, if needed, your passport and visa.

United States Citizenship and Immigration Services Addendum
("USCIS Addendum")

This United States Citizenship and Immigration Services Addendum ("USCIS Addendum") is hereby made a part of the Apartment Lease Contract ("Lease"), entered into on _____, 20__ by and between _____ ("Property Manager")
and _____ (Managing Entity Name) ("Resident") who leases an apartment unit located at _____ ("Community") with the same force and effect as though set forth in the Lease. Except as provided herein, the provisions of the Lease shall remain unaffected.

All residents residing in the Community must provide documentation establishing that he or she legally resides in the United States in a manner consistent with the laws and regulations enforced by the United States Citizenship and Immigration Services, unless otherwise prohibited by law. All residents are responsible for maintaining the legal right to reside within the United States at all times during their stay at a Lincoln community by complying with all applicable laws and regulations including, but not limited to, United States Citizenship and Immigration Services requirements.

Resident understands that the Property Manager is relying on Resident's representations, statements and documentation provided as verification of his or her legal residency within the United States.

By signing below, Resident is affirming that that the information provided to validate legal residency within the United States is true and correct. Resident further agrees that at all times during his or her lease agreement Resident will comply with all applicable laws and regulations, including USCIS requirements, to maintain legal residency.

Resident Signature: _____

Date: _____

THIS FORM SHOULD NOT BE USED IN CALIFORNIA OR ANY OTHER STATE WHERE THE REQUEST FOR INFORMATION REGARDING LEGAL RESIDENCY IS PROHIBITED BY LAW.