



PPMC Rental Application
 4100B S Fairview, Springfield, MO 65807
 417-883-9506 managment@ppmcrentals.com
 (Spouses may complete a joint application)

Putting People First
 Providing a Sense of Home
 Managing with Excellence
 Creating Community



GENERAL INFORMATION ON APPLICANT

| | | | | |
|------------------------|--------------------------------|-----------|---------------------------|---------------|
| First Name | Middle Initial | Last Name | Social Security Number | |
| Present Street Address | City | State | Zip | Telephone No. |
| Date of Birth | Driver's License No. and State | OR | Govt. Issued Photo ID No. | |

E-mail address: _____
 have you ever been known under any other names or aliases? Yes No
 If yes, please list:

List States resided in for the past 10 years from this application date: _____
 How did you hear about us? _____

GENERAL INFORMATION ON SPOUSE

| | | | | |
|------------------------|--------------------------------|-----------|--------------------------|---------------|
| First Name | Middle Initial | Last Name | Social Security Number | |
| Present Street Address | City | State | Zip | Telephone No. |
| Date of Birth | Driver/s License No. and State | OR | Govt. Issued Photo ID No | |

E-mail address: _____
 Have you ever been known under any other names or aliases? Yes No If yes, please list:

List States resided in for the past 10 years from this application date: _____

GENERAL INFORMATION ON ADULT DEPENDENT (if applicable)

| | | | | |
|------------------------|--------------------------------|-----------|---------------------------|---------------|
| First Name | Middle Initial | Last Name | Social Security Number | |
| Present Street Address | City | State | Zip | Telephone No. |
| Date of Birth | Driver's License No. and State | OR | Govt. Issued Photo ID No. | |

List States resided in for the past 10 years from this application date: _____
 Do you or someone residing in the apartment need to request a special accommodation due to a disability? If yes, please list the accommodation request: _____

EMPLOYMENT HISTORY ON APPLICANT

Name of Present Employer

Employer's Street Address City State Zip Telephone No.

Position Held with Present Employer Gross Monthly Income Length of Employment

Supervisor's Name Telephone Number

If current employment is less than 6 months, please complete previous employment

Name of Previous Employer

Previous Employer's Street Address City State Zip Telephone No.

Position Held with Previous Employer Gross Monthly Income Length of Employment

Previous Supervisor's Name Telephone Number

EMPLOYMENT HISTORY ON SPOUSE

Name of Present Employer

Employer's Street Address City State Zip Telephone No.

Position Held with Present Employer Gross Monthly Income Length of Employment

Supervisor's Name Telephone Number

If-current employment is less than 6 months, please complete previous employment

Name of Previous Employer

Previous Employer's Street Address City State Zip Telephone No.

Position Held with Previous Employer Gross Monthly Income Length of Employment

Previous Supervisor's Name Telephone Number

CREDIT AND CRIMINAL HISTORY

Bank Name City State Zip

Do you have any other non-work income you want considered (alimony, child support, and investments)?

Yes No If yes, please explain: _____

Have you or any other prospective residents ever owned a home? Yes No

Have you, your spouse any other prospective residents or occupants listed on this Application ever (**check if applicable**; you represent the answer is "No" to any item not checked below): been evicted or asked to move out? broken a rental agreement or lease contract? _ received deferred adjudication for either a felony, a sex related offense or a misdemeanor?

been or are currently delinquent to a previous landlord? If yes, please: _____

declared bankruptcy; if so, when? _____

been convicted for either a felony, a sex-related offense or a misdemeanor? If yes, please explain: _____

been arrested for any crime which has not been fully adjudicated (by deferred adjudication dismissal, acquittal, or conviction)? If yes, please explain: _____

RENTAL HISTORY

List a minimum of 24 months of rental / mortgage history.

| | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|---------------|----------------|
| Name of Present Landlord (If Applicant and Applicant 's Spouse are completing this Application, name all Landlords for both parties) | Monthly Rental Rate | Date Moved In | Date Moved Out |
| Street Address | City | State | Zip |
| Telephone Number of Present Landlord | | | |
| Name of Previous Landlord (Immediately prior to the Present Landlord) (If Applicant and Applicant 's Spouse are completing this Application, name all Landlords for both parties) | Monthly Rental Rate | Date Moved In | Date Moved Out |
| Street Address | City | State | Zip |
| Telephone Number of Previous Landlord | | | |

OTHER OCCUPANTS (list all persons not signing this Application who will be listed on the lease)

| | | | | |
|------------------------|--------------------------------|-------|-----|---------------------------|
| Name | Social Security Number | | | Relationship to Applicant |
| Present Street Address | City | State | Zip | Telephone No. |
| Date of Birth | Driver's License No. and State | | OR | Govt. Issued Photo ID No. |
| Name | Social Security Number | | | Relationship to Applicant |
| Present Street Address | City | State | Zip | Telephone No. |
| Date of Birth | Driver's License No. and State | | OR | Govt. Issued Photo ID No. |
| Name | Social Security Number | | | Relationship to Applicant |
| Present Street Address | City | State | Zip | Telephone No. |
| Date of Birth | Driver's License No. and State | | OR | Govt. Issued Photo ID No. |

ANIMALS

Do you or any other prospective residents have animals?

| | | | | |
|------|-------|--------|-------|-----|
| Type | Breed | Weight | Color | Age |
| Type | Breed | Weight | Color | Age |

YOUR VEHICLE(S) If Applicant will be parking a vehicle on the property, please provide the following information:

| | | | | |
|---------------------------------------|-----------------|-------|---------------------------------|-------------------------|
| Vehicle Type (car, motorcycle, truck) | Make of Vehicle | Model | Year | State/License Plate No. |
| Vehicle Type (car, motorcycle, truck) | Make of Vehicle | Model | Year | State/License Plate No. |
| Vehicle Type (car, motorcycle, truck) | Make of Vehicle | Model | Year over the age of 18 years): | State/License Plate No. |

EMERGENCY In case of emergency, notify (preferably a relative

| Name | Relationship | Address | Home Phone No. | Work Phone No. |
|------|--------------|---------|----------------|----------------|
|------|--------------|---------|----------------|----------------|

In the event that the Applicant becomes a resident for property applied for, Applicant's execution of this Application shall authorize the Owner, in the event of the Applicant's death to: (i) grant to the person designated above access to the Applicant's unit at a reasonable time and in the presence of the Owner or the Owner's agent; (ii) allow this person to remove any of the Applicant's property or any other contents found in the Applicant's unit or any of Applicant's property located in the mailbox, storerooms or common areas; and (iii) refund the Applicant's security deposit, less lawful deductions, to this person. Applicant also authorizes the Owner to allow this person access to remove all contents of the unit as well as property in the mailbox, storerooms and common areas if Applicant becomes seriously ill.

AUTHORIZATION: Applicant represents that all the above information is true and complete and authorizes the verification of same and the performance of a credit check on Applicant as appropriate by all available means. If Applicant provides any false or misleading information in this Application, Owner shall have the right to automatically reject this Application, and the Application Deposit and Security Deposit will be automatically forfeited by the Applicant. Applicant further acknowledges that an investigative consumer report includes information as to character, general reputation, personal characteristics: and mode of living, whichever area applicable, of the Application may be made and that any person on which an investigative consumer report will be made has the right to request a complete and accurate disclosure of the nature and scope of the investigation requested and also has the right to request a written summary of the person's right under The Fair Credit Reporting Act. Applicant hereby authorizes the Owner or the Owner's Agent to obtain and hereby instructs any consumer reporting agency designated by Owner or Owner's Agent to furnish a consumer report under The Fair Credit Reporting Act to Owner or Owner's Agent to use such consumer report in attempting to collect any amount due and owing under this Application, the Applicant's lease (to be executed after Application approval) or for any other permissible purpose.

Applicant acknowledges that Owner's acceptance of Applicant as a resident at the property is conditional upon: (i) Owner's approval Q/- this Application; and (ii) receipt of an executed Apartment Lease Agreement from Applicant. In the event any of these conditions have not been met, Owner shall have no obligation to lease to Applicant.

Security Deposit Refunded:

If this Application is denied, the Security Deposit will be refunded to Applicant.

Security Deposit Retained by Owner

Owner shall be entitled to retain the Security Deposit as liquidated damages; in which case, all further obligations to lease the premises to Applicant shall be terminated if: (i) the Application is withdrawn for any reason, after signing this Application; (ii) the Application is accepted, but Applicant does not sign an Apartment Lease Agreement as and when required by Owner; or (iii) if the Applicant has provided false or misleading information within this Application. For the purposes of this provision, the Applicant is required to pay an additional Security Deposit in order to qualify for occupancy, the Application shall be deemed conditionally accepted prior to the payment Of such additional Security Deposit and the failure ta pay the additional Security Deposit will entitle Owner to retain the originally paid Security Deposit, even if the Application is subsequently rejected by the Applicant *s failure to pay the required additional Security Deposit

Security Deposit as a Hold deposit

If approved, the security deposit will be treated as a hold deposit, and will be applied to the total amount of security deposit required upon move in.

Applicant acknowledges that Owner's standard Lease which Applicant will be asked to sign provides that, after the initial term of the Lease, the Lease will automatically continue on a month-to-month basis until terminated by either party giving at least sixty (60) days prior written notice Or termination to the other, whether such termination date is to be on the date of the expiration of the initial term or any renewal term thereafter.

Applicant further acknowledges that Owner's standard Lease provides that the resident will have the right, in the resident's sole discretion, to terminate the Lease prior to the expiration of the initial or renewal term by following certain procedures, which will include paying a Cancellation Payment in an amount specified in the Cancellation Option contained in the Lease and signing a Buyout Agreement. Applicant is encouraged to review Owner's standard Lease, as well as the State Addendum to the Lease for the state in which the property is located, prior to signing and to ask any questions Applicant may have regarding any Lease provisions.

