

SPARTAN MANAGEMENT LLC

Heege Place Apartments *Lone Oak Apartments* **Village on the Green Apartments** *Woodridge Manor Apartments*

7028 Heege Road Suite 100 St. Louis MO 63123 / PO Box 270271 St. Louis MO 63127
Email: info@spartanmanagementllc.com Website: www.spartanmanagementllc.com
Phone: (314) 729_0479 Fax: (314) 842_2772

LEASE APPLICATION

(1 Per Adult Please Fill Out Completely)

Property: _____

Apt #: _____

Preferences: Unit Type: _____

Floor: _____

Move-In Date: _____

PERSONAL

Last Name: _____ First Name: _____ Middle Initial: _____

Birth Date: _____ Driver's License/State ID Number: _____ State: _____

SSN#: _____ Phone Number: _____

Email: _____

- Have you ever been **charged** with a violent, drug, or sex related crime: – If yes, please explain below.
- Have you ever been evicted or sued by a landlord for not paying rent: – If yes, please explain below.
- Have you ever broken a lease or refused to pay rent: – If yes, please explain below.
- Indoor smoking of any kind, including medical marijuana, is not permissible. Do you agree to comply:
- Is your monthly income at least 3 times rent: - If no, discuss with property manager.
- Are you military, police, or fire(active or retired): – If yes, provide proof and take 5% off the rent.

Additional Occupants/Comments - All applicants 18 and over must fill out a separate application. (Please list below each individual as well as relationship and age, including children):

RESIDENCE HISTORY

Current address: _____ City: _____ State: _____ Zip: _____

How long: _____ Do you currently: _____ What is your current monthly rent/mortgage payment: _____

Are your payments current: _____ How many late payments have you had: _____ Amount of current security deposit: _____

Reason for moving: _____

Name of Current Landlord/Mortgage Lender: _____ Phone: _____

Previous address: _____ City: _____ State: _____ Zip: _____

How long: _____ Reason for moving: _____

Was your full security deposit returned: _____ How many late payments did you have: _____ Monthly payment: _____

Name of Previous Landlord/Mortgage Lender: _____ Phone: _____

FOR OFFICE USE ONLY

Date: ___ / ___ / ___ Approved Declined: _____

Deposit: \$ _____ Rent: \$ _____ One-time Charges: _____

Specials/Comments: _____

INCOME

Your GROSS monthly income from ALL sources before taxes is: \$ _____

My source(s) of income is/are identified below (*check all that apply and enter respective amounts*):

Employment _____ Unemployment _____ Disability _____
Grants _____ Scholarships _____ Loans _____ Other(explain below) _____

My current work status is:

Name of Primary Employer: _____ Phone: _____

Position: _____ Length of employment: _____

Monthly salary: _____ Supervisor's name: _____

Name of Secondary Employer: _____ Phone: _____

Position: _____ Length of employment: _____

Monthly salary: _____ Supervisor's name: _____

Additional Income (this section is optional):

If there are additional sources of income such as HUD, child support, alimony, food stamps, etc. we should consider, please list below.

Additional source: _____ Monthly Income: \$ _____

Contact person: _____ Phone: _____

Is it anticipated that this source will continue throughout your residency with us:

VEHICLES/CREDITORS

Vehicle Make/Model/Color/Year: _____

Vehicle tag(must be current): _____ State: _____ Is your vehicle:

Financed/Leased through: _____ Monthly Payment: _____

Please list all other significant monthly payment obligations and amounts that may not show up on your credit report:

PERSONAL REFERENCE

Name: _____ Phone: _____

Relationship: _____ How Long: _____

HOW DID YOU HEAR ABOUT US

How did you hear about us?

Other: _____

If Referral by Existing Resident – Name(must be listed here for referral fee): _____

EMERGENCY CONTACT

(This Must Be Filled Out)

In the event you would be unable to make a rent payment due to an emergency/illness/loss of employment/vacation/unforeseen event, please identify a relative, friend, or agency that we can contact and would be willing to assist you?

Name: _____

Address: _____

Relationship: _____ Phone: _____ Alt. Phone: _____

PETS

Do you have a pet: – If yes, please see the restrictions and additional fees and rent requirements below.

- The following breeds and mixes are prohibited – Pit Bulls/Rottweilers/Pincers/Shepards/Staffordshire Terriers, Great Danes, etc.
- Be sure to discuss your dog with the property manager ahead of time to avoid problems after moving in.
- Weight restrictions for dogs vary by property. Discuss with the property manager.
- Shot records must be provided prior to lease signing. Cats must be spayed/neutered.
- All snakes and large reptiles are prohibited. Please get approval from management for all other caged pets.
- *We have dropped our pet deposit and now charge a flat pet rent of \$35 per month per pet.*

- Pet #1: Breed: _____ Weight: _____ Color: _____
- Pet #2: Breed: _____ Weight: _____ Color: _____

MOVE-IN COSTS & MONTHLY RENT RECAP

(To Be Filled Out By Applicant)

One-time Move-in Costs/Deposits:

- \$ _____ - Refundable Security Deposit
- \$ _____ - Pet Fee - Not Currently Applicable
- \$ _____ - Lease Options – *(accent walls/ceiling fans/storm door/etc)*
- \$ _____ - **Total One-Time Charges**

Monthly Costs:

- \$ _____ - Base Rent
- \$ _____ - Monthly Pet Charges – *(if applicable-see above)*
- \$ _____ - Water/Misc Charges – *(Specify: _____)*
- \$(_____) – Credits – 5% Military/Police/Fire Discount / \$5 Renter’s Insurance Credit*(Ask for details)*
- \$ _____ - **Total Monthly Rent**

THANK YOU

Thank you for completing our application and considering us for your new home. Please note that a completed application requires some or all of the following:

- Application fee** – \$30 per adult–Amount Enclosed: \$ _____ Cash/Credit/Debit/MO-**Payable to:**
- Copy of driver’s license or government ID** – *This can be done at the leasing office, except for Maryland Manor.*
- Proof of income** – *Needed with application – Pay Stub/Disability Statement/Social Security Statement/Etc.*
- Proof of military service** – *If applicable.*
- Pet shot records** – *If pet(s)are included in lease.*
- Co-signer agreement and application fee** – *If applicable.*
- Signature below**

The non-refundable application fee is required prior to processing and will be used to verify some or all information contained herein. By signing below, applicant authorizes Spartan Management LLC and/or its assigns to verify, now and in the future, the information provided above using all legal means and represents all above information is true and accurate. If it is determined that information provided above was intentionally falsified, resident will forfeit entire security deposit. Your personal information is never used outside of our office, sold, traded, or otherwise given out except for delinquent rent collection purposes.

Please check here to confirm that you have read all five pages of the application.

SIGNATURE: _____ **DATE:** _____
(The Application Must Be Signed To Be Processed-Anyone Under 18 Cannot Apply For Housing)



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LEASING POLICES & APPROVAL STANDARDS

Please find listed below our application policies and approval requirements. The items below establish the minimum requirements needed to be approved for the rental unit for which you are applying.

Application and Leasing Policies

1. There is a non-refundable application fee of \$30 per adult, including each co-signer and it must be paid with cash, credit, debit, or money order. Use the link above and select the correct property to pay the app fee.
2. Every applicant must fill out and submit an application. Applicants must be at least 18 years of age.
3. Advertised rates are based on a 12-month lease; however, shorter lease options are available.
4. Rent may be split into multiple payments per month for a \$10 per payment fee. Ask for details.
5. Renter's insurance is optional; however, we offer \$5 off your monthly rent for having it. You must name us as an additional insured. Ask manager for details prior to buying a policy.
6. Approved pets include: cats, most dogs, fish, small caged rodents, caged birds, and small caged reptiles. Snakes, ferrets, raccoons, etc, are prohibited. If you are not sure, please ask before applying or taking in a new pet. See application for additional pet restrictions and requirements.
7. Roommates may not be moved in for at least 3 months. Prior approval from landlord must be obtained and an application and \$30 fee must be submitted prior to approval.
8. **INDOOR SMOKING IS STRICTLY PROHIBITED AT ALL OF OUR PROPERTIES.**
If you think this might be a problem for you, please do not apply.

Approval Standards

1. We generally don't deny applicants over credit if they are willing to put up additional funds, including prepaid rent and/or additional security deposits.
2. Applicants must be employed or have verifiable income equaling 3 times rent or more before taxes. Income of a lesser amount may require additional security deposit and/or a co-signer.
3. Employment duration of less than 1 year may require additional security deposit.
4. Unemployment income alone will need a local employed co-signer and first and last month's rent.
5. Cash only income will need a local employed co-signer and first and last month's rent along with proof of employment.
6. Credit scores below 525 will require additional security deposit and possibly a co-signer.
7. Credit score of less than 475, if approved, will require a local cosigner along with first and last month's rent and a double deposit.
8. Any drug, violent (rape/murder/attempted rape or murder/assault with a deadly weapon/robbery), or sex related felonies or misdemeanors will not be accepted.
9. All other felonies and misdemeanors will be considered by management prior to approval.
10. Current bankruptcies require first and last month's rent as well as a double security deposit. Discharged bankruptcies require first and last month's rent along with the security deposit. Outstanding judgments will be considered on a per case basis but generally will require additional money up front.

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CO-SIGNER AGREEMENT

(Please Fill Out If Required By Property Manager)

APPLICANT RELEASE: I hereby authorize management to forward the Co-Signer Agreement to my lease guarantor/co-signer and to communicate with them on my behalf concerning my lease obligations throughout the term of my lease as it may become necessary from time to time.

PRINT Name of Apartment Applicant: _____

SIGNATURE of Apartment Applicant: _____ **DATE:** _____

By signing this Co-Signer Agreement, the undersigned hereby guarantees all obligations of resident under the above Lease Contract. Also by signing this Co-Signer Agreement, the undersigned acknowledges they have read the Lease Contract. This Co-Signer Agreement shall continue and will not be affected by amendments, modifications, roommate changes, unit changes, or renewals of the Lease Contract which may be agreed to from time to time between resident and management. Delay or failure by management to exercise rights, pursue remedies, issue notices, or make demands of you, as Guarantor, shall not be considered a waiver of our rights. All of our remedies under the Lease Contract against the resident apply to Guarantor as well. All residents and Guarantors are jointly and severally liable for the terms of the lease. This Agreement is part of the Lease Contract and shall be performed in the county in which the dwelling unit is located. Co-Signer must live within 90 miles of apartment community being applied for.

Guarantor's Information

Full Name: _____ Date of Birth _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (_____) _____ Work Phone: (_____) _____

Cell Phone: (_____) _____ Social Security #: _____

Email: _____

Present Employer: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Position: _____ Length on Job: _____ Monthly Salary: _____

GUARANTOR'S SIGNATURE: _____ **DATE:** _____

(A copy of a driver's license or state issued ID, along with \$30, must be included.)