SPARTAN MANAGEMENT LLC

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:_Village on the Green	Apt #:	Anticipated Move-In Date:	//

Preferences: Unit Type: 1 Bed 2 Bed Floor: 1st Floor 2nd Floor

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: 🛛 Yes 🗅 No If yes, please explain below.
- Have you ever been evicted or sued by a landlord for not paying rent: 🗆 Yes 🗅 No If yes, please explain below.
- Have you ever broken a lease or refused to pay rent: D Yes D No If yes, please explain below.
- We no longer allow indoor smoking of any type, including medical marijuana. Do you agree to comply with this requirement?
 Yes No Current residents are grandfathered until Jan 1, 2020.
- Is your monthly income at least 3 times rent: D Yes D No If no, discuss with property manager.
- Are you military, police, or fire(active or retired): 🗆 Yes 🗅 No 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: 🗖 Rent	Own? What is your current monthl	y rent/mortgage	payment:\$
Are your payments current: 🗖 Yes 🛛 No How many la	e payments have you had: Amou	nt of current sec	urity deposit:\$
Reason for moving:			
Name of Current Landlord/Mortgage Lender:			
Previous address:	City:	State:	_ Zip:
How long: Reason for moving:			
Was your full security deposit returned: \Box Yes \Box No H	ow many late payments did you have:	Monthly	payment:\$
Name of Previous Landlord/Mortgage Lender:	PI	none:	
I	OR OFFICE USE ONLY		
Date:/	:		
Deposit: \$ Rent: \$ One-t	ime Charges:		
Specials/Comments:			

INCOME

Your GROSS mont	hly income from ALL s	ources befor	<mark>re ta</mark> .	<u>xes is:</u> \$	
My source(s) of income is/a	are identified below(check all th	at apply and ente	er resp	pective amounts):	
Employment \$	Unemployment \$	Unemployment \$ Disability \$			
Grants \$	Chemployment \$ Disability \$				
My current work status is:	□ Full-time □ Part-time □	Student 🔲 Ret	tired	Self-employed Unemployed Disabled	
Name of Primary Employer	r. 		Pl	hone:	
Position:			Leng	th of employment:	
Monthly salary:	Superviso	or's name:			
Name of Secondary Emplo	yer:			Phone:	
Position:			Leng	gth of employment:	
Monthly salary:	Superviso	or's name:			
Additional Income (thi	s section is optional):				
If there are additional source	es of income such as child supp	ort, alimony, foo	d stam	nps, etc. you wish to have considered, please list below.	
Additional source:				Monthly Income: \$	
Contact person:			_ Phor	ne:	
Is it anticipated that this so	urce will continue throughout yo	our residency with	n us: 🕻	Yes No	
	VEHI	CLES/CR	ED	ITORS	
Vehicle Make/Model/Color	:/Year:				
Vehicle tag(must be current	t): S	tate: Is yo	ur veh	icle: Owned D Financed D Leased	
Financed/Leased through:_				Monthly Payment:\$	
Please list all other signific	ant monthly payment obligation	s and amounts the	at may	not show up on your credit report:	
	PERSO	ONAL RE	FEI	RENCE	
Name:			F	Phone:	
Relationship:				How Long:	
	HOW DID	YOU HE	4 <i>R</i> .	ABOUT US	
□ Internet Posting – □ I	-	Apartments.com		Rent.com Dother	
		GENCY (This Must Be Fill			
identify a relative, friend, o	unable to make a rent payment or agency that we can contact and	l would be willin	g to as	Iness/loss of employment/vacation/unforeseen event, pleassist you?	ase
Address:					
Relationship:	Phone:			Alt. Phone:	

PETS

Do you have a pet: \Box Yes \Box No – If yes, please see the restrictions and additional fees and rent requirements below.

- The following breeds and mixes are prohibited Pit Bulls/Rottweilers/Pincers/Shepherds/Staffordshire Terriers, Great Danes, etc.
- Large snakes/reptiles are prohibited. Venemous reptiles are strictly prohibited.
- 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.
- Add \$30 per month per pet. There is a limit of 2 pets.
 - Pet #1: Dog Cat Type: ______ Weight: _____ Color: _____
 - Pet #2: Dog Cat Type: ______Weight: _____Color: _____

MOVE-IN COSTS & MONTHLY RENT RECAP (To Be Filled Out By Applicant)

One-time Move-in Costs:

\$_____400_____ - Refundable Security Deposit – (*if applicable-discuss with manager*)

 $\underline{0}$ - Pet Fee – (*if applicable-see above*)

S______ - Other – (additional deposit, if required)

\$______--Total Security Deposit

Monthly Costs:

\$_____- Base Rent

\$______ - Monthly Pet Charge - (if applicable-see above)

\$______ - Misc Charges – (*specify*:______

\$(_____) - Credits - 5% Military/Police/Fire Discount / \$5 Renter's Insurance Discount(Ask for details)

\$_____ - Total Monthly Rent

Specials/Promotions/Discounts Agreed to with Manager:

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 (*check all that apply*):

Application fee – \$25 per adult – Amount Enclosed: \$_____ Check/Credit/Debit/MO-(Payable to: Village on the Green)

Copy of driver's license or government ID – *This can be done at the leasing office.*

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 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.

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 \$25 per person, including each co-signer and it must be paid with cash, credit, debit, or money order.
- 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, generally for an additional \$50 per month.
- 4. Advance rent payments made at move in must be made with cash, money order, credit, debit, or cashier's check.
- 5. Rent may be split into multiple payments per month for a \$10 per payment fee. Ask for details.
- 6. 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.
- 7. 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.
- 8. Roommates may not be moved in for at least 3 months. Prior approval from landlord must be obtained and an application and \$25 fee must be submitted prior to approval.

Approval Standards

- 1. We generally don't deny applicants over credit if they are willing to put up additional funds, including prepaid rent 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 an employed co-signer and first and last month's rent.
- 5. Cash only income will need an employed co-signer and first and last month's rent along with proof of employment.
- 6. Credit scores below 500 will require additional security deposit and possibly a co-signer.
- 7. Credit score of less than 475 will need an employed co-signer and pre-payment will be required.
- 8. Any drug, violent (rape/murder/attempted rape or murder/assault with a deadly weapon/robbery), and/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.

Security Deposits

The security deposit is \$400 for both 1 and 2 bedroom apartments.

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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.

s Information
Date of Birth
State: Zip:
Work Phone: ()
cial Security #:
Phone:
State: Zip:
th on Job: Monthly Salary:

GUARANTOR'S SIGNATURE:

DATE:

(A copy of a driver's license or state issued ID, along with \$25, must be included.)