

APPLICATION

For Property Address/Unit #

1st APPLICANT'S Phone #

APPLICATION LAST REVISED DECEMBER 2014

Aaron Properties, Inc.

Office: 1110 E. Norton Rd, Suite B-12

Springfield, MO 65803

Mail: P. O. Box 2903

Springfield, MO 65801

Email address: aaronproperty@att.net

Website address: aaronpropertyus.com

417/833-8080 Fax: 417/833-8081

**TO BE COMPLETED BY OFFICE:
PHOTOCOPY DRIVER'S LICENSE OR ID___**

Money Order Only:

Application Fee: \$35 per person

Co-Signer? Yes/No (if yes, app required)

Total Number of Applicants: _____

Total Application Fees \$ _____

Security Deposit: \$ _____

Normal Rent/Mo: \$ _____

Rent Special? _____

This section is to be completed by Office Personnel. Requested Background Information:
Criminal _____ Landlord _____ Income _____ Credit _____

- NOTE #1:** Aaron Properties does not permit anyone 18 years of age or older to live in its units unless the person has completed a lease application AND has been approved for occupancy. The presence of unapproved occupants is grounds for breach of contract.
- NOTE #2:** Aaron Properties charges a \$100 administrative fee for anyone added to occupancy after commencement of the lease. A formal application, including the \$35 fee, along with the routine background check, is required to process such a request.
- NOTE #3:** Aaron Properties reserves the right to charge additional for apartments that are owner paid utilities if occupancy exceeds one adult per bedroom per the terms of our Lease. *** APPLICATION FEE IS NON-REFUNDABLE***

- Name:** _____ **Maiden Name:** _____
First Middle Last
- Your Current Address:** _____
Years/Months at this address: _____ Reason for moving: _____
- Your Current Landlord:** _____ Their Phone #: _____
- Your Former Landlord:** _____ Their Phone #: _____
- EMPLOYMENT: ARE YOU CURRENTLY EMPLOYED? Yes ___ No ___**
Your Current Employer: _____ Address: _____
Your position/title: _____ Employer's Phone #: _____
How long have you worked there: _____ Your Rate of Pay: \$ _____ per _____ Full or Part time (circle)
- FAMILY:**
Do you have children? Yes ___ No ___ Child 1 Name _____ Age _____
How many children will be living with you? _____ Child 2 Name _____ Age _____
Child 3 Name _____ Age _____
- EMERGENCY CONTACTS: nearest living relatives:**
Name: _____ Phone _____ Relationship _____
Name: _____ Phone _____ Relationship _____
- PETS:** Do you have pets? Yes ___ No ___ Breed(s): _____ Indoor or Outdoor? _____
- VEHICLES:** Make _____ Model _____ Year _____ Color _____ License PL. # _____
Make _____ Model _____ Year _____ Color _____ License PL. # _____
- CRIMINAL/LANDLORD HISTORY:**
 - Has anyone applying to occupy this dwelling ever been convicted of or pled guilty or "no contest" to a felony (whether or not resulting in a conviction)? Yes ___ No ___
 - Has anyone applying to occupy this dwelling ever been convicted of or pled guilty or "no contest" to offenses related to possession of illegal drugs or paraphernalia, or to the manufacturing, distribution, and/or intent to distribute a controlled substance (whether or not resulting in a conviction)? Yes ___ No ___
 - Has anyone applying to occupy this dwelling ever been convicted of or pled guilty or "no contest" to a misdemeanor involving sexual misconduct (whether or not resulting in a conviction)? Yes ___ No ___
 - Does anyone applying to occupy this dwelling have an unsatisfied landlord eviction or an outstanding balance due to a previous landlord? Yes ___ No ___

I, the undersigned, have completed the above application and swear that the information provided by me is true, accurate, and correct. I understand that any false statement on this application can lead to rejection of my/our application, or subsequently, to the immediate termination of my/our lease. I hereby authorize Aaron Properties, Inc. to verify this information by means that can include but are not limited to credit reports and contact with landlords, creditors, banks, and references. I authorize the disclosure and release of any information regarding my rental, employment, and/or credit history.

Date: _____ PRINT NAME: _____ Signature: _____

APPLICANT #2

This section is to be completed by Office Personnel. Requested Background Information:

Criminal _____ Landlord _____ Income _____ Credit _____

NOTE #1: Aaron Properties does not permit anyone 18 years of age or older to live in its unit unless the person has completed a lease application AND has been approved for occupancy. The presence of unapproved occupants is grounds for breach of contract.

NOTE 2: Aaron Properties charges a \$100 administrative fee for anyone added to occupancy after commencement of the lease. A formal application, including the \$35 fee, along with the routine background check, is required to process such a request.

NOTE 3: Aaron Properties reserves the right to charge additional for apartments that are owner paid utilities if occupancy exceeds one adult per bedroom per the terms of our Lease. * APPLICATION FEE IS NON-REFUNDABLE*

Is this a Co-Signer application? Yes ___ No ___ If so, relationship to Applicant: _____

For Property Address/Unit #: _____ Your Phone #: _____

- Name: _____ Maiden Name: _____
Your Current Address: _____
Your Current Landlord: _____ Their Phone #: _____
Your Former Landlord: _____ Their Phone #: _____
EMPLOYMENT: ARE YOU CURRENTLY EMPLOYED? Yes ___ No ___
FAMILY: Do you have children? Yes ___ No ___
EMERGENCY CONTACTS: nearest living relatives:
PETS: Do you have pets? Yes ___ No ___
VEHICLES: Make _____ Model _____ Year _____ Color _____ License PL. # _____
CRIMINAL/LANDLORD HISTORY:
5. Has anyone applying to occupy this dwelling ever been convicted of or pled guilty or "no contest" to a felony...
6. Has anyone applying to occupy this dwelling ever been convicted of or pled guilty or "no contest" to offenses related to possession of illegal drugs or paraphernalia...
7. Has anyone applying to occupy this dwelling ever been convicted of or pled guilty or "no contest" to a misdemeanor involving sexual misconduct...
8. Does anyone applying to occupy this dwelling have an unsatisfied landlord eviction or an outstanding balance due to a previous landlord? Yes ___ No ___

I, the undersigned, have completed the above application and swear that the information provided by me is true, accurate, and correct. I understand that any false statement on this application can lead to rejection of my/our application, or subsequently, to the immediate termination of my/our lease. I hereby authorize Aaron Properties, Inc. to verify this information by means that can include but are not limited to credit reports and contact with landlords, creditors, banks, and references. I authorize the disclosure and release of any information regarding my rental, employment, and/or credit history.

Date: _____ PRINT NAME: _____ Signature: _____

THIS SECTION IS TO BE COMPLETED BY APPLICANT #1 REGARDING YOUR CURRENT OR MOST RECENT APARTMENT, COMMUNITY, OR LANDLORD.

Name of Apartment complex: _____

Address of unit YOU occupied: _____

Contact person/landlord? Name: _____ Phone: _____ Fax: _____

I authorize Aaron Properties, Inc. to inquire about and to verify all the information on the form below. A copy of the inquiry and response will not be made available to me unless I request it. I authorize my former landlord to release the information.

Date: _____ PRINT NAME: _____ Signature: _____

THIS SECTION IS TO BE COMPLETED BY APPLICANT #2 REGARDING YOUR CURRENT OR MOST RECENT APARTMENT, COMMUNITY, OR LANDLORD.

Name of Apartment complex: _____

Address of unit YOU occupied: _____

Contact person/landlord? Name: _____ Phone: _____ Fax: _____

I authorize Aaron Properties, Inc. to inquire about and to verify all the information on the form below. A copy of the inquiry and response will not be made available to me unless I request it. I authorize my former landlord to release the information.

Date: _____ PRINT NAME: _____ Signature: _____

TO BE COMPLETED BY OFFICE. Re Applicant #1:

Occupany dates: _____ to _____

Pets? Yes ___ No ___ What kind? _____

Other names on Lease? _____

Monthly rent: \$ _____

Did resident depart owing a balance? N Y = \$ _____

Amount of resident's security deposit: \$ _____

Amount of security deposit refunded: \$ _____

Did resident give required notice to move? Yes No

Is resident in good standing? Yes No

Any late payments? No Yes How many? _____

Any legal notices served? No Yes How many? _____

Any returned checks? No Yes How many? _____

Any noise/visitor complaints? No Yes How many? _____

Explain: _____

Any lease violations? No Yes How many? _____

Please explain violations: _____

Would you rent to the resident again? Yes No

THANK YOU for your help.
Please return via FAX ASAP to 417/833-8081
 Aaron Properties, Inc. Springfield, MO
 417/833-8080

TO BE COMPLETED BY OFFICE. Re Applicant #2:

Occupany dates: _____ to _____

Pets? Yes ___ No ___ What kind? _____

Other names on Lease? _____

Monthly rent: \$ _____

Did resident depart owing a balance? N Y = \$ _____

Amount of resident's security deposit: \$ _____

Amount of security deposit refunded: \$ _____

Did resident give required notice to move? Yes No

Is resident in good standing? Yes No

Any late payments? No Yes How many? _____

Any legal notices served? No Yes How many? _____

Any returned checks? No Yes How many? _____

Any noise/visitor complaints? No Yes How many? _____

Explain: _____

Any lease violations? No Yes How many? _____

Please explain violations: _____

Would you rent to the resident again? Yes No

THANK YOU for your help.
Please return via FAX ASAP to 417/833-8081
 Aaron Properties, Inc. Springfield, MO
 417/833-8080

BACKGROUND SCREENING FORM

APPLICANT #1 NAME

<input type="text"/>	<input type="text"/>	<input type="text"/>
First	Middle	Last Name (include hyphenated names)

Applicant identification

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Social Security Number	Date of Birth	Driver's License # or State ID#	State of Issuance

Current Address

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street	City	State	Zip Code

Previous Address

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street	City	State	Zip Code

APPLICANT #2 NAME

<input type="text"/>	<input type="text"/>	<input type="text"/>
First	Middle	Last Name (include hyphenated names)

Applicant identification

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Social Security Number	Date of Birth	Driver's License # or State ID#	State of Issuance

Current Address

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street	City	State	Zip Code

Previous Address

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Street	City	State	Zip Code

AUTHORIZATION

I HEREBY CONSENT AND AUTHORIZE Aaron Properties, Inc., its affiliates, and its agents to secure information pertaining to my character and background. I understand that the information supplied by me can be utilized in conducting a comprehensive background investigation. An investigative consumer report may be prepared concerning my character, credit, and criminal history.

This investigation may include, but will not be limited to: a criminal record search, a social security number verification, an employment consumer credit history, a motor vehicle driving record history, past employment, educational and professional reference verifications, national security watch list database research, as well as the confirmation of any information supplied by me on this or any other Aaron Properties, Inc. application form.

I release from liability any and all persons, companies, and corporations that supply information regarding my history as a result of this investigation. I understand that any information discovered is done so through human intelligence sources, electronic databases and on-site public record research. I further release and indemnify Aaron Properties, Inc., its affiliates, and its agents against any liability that may result from conducting this investigation.

Signature of Applicant #1

Date

Signature of Applicant #2/or co-signer

Date