



# Soulard Market Loft Apartments

## Resident Selection Criteria

(Please read before completing your application)



In signing the application and submitting your application charge, you are giving us the right to research the information you have given us.

- We may check your RESIDENCY HISTORY a minimum of two (2) years previous.
- We may check your EMPLOYMENT HISTORY (both current and past if applicable)
- We may check your CREDIT RATING with the credit bureau
- We may check your BANK ACCOUNTS for good standing
- CRIMINAL BACKGROUND checks may be conducted and the findings may prevent the application from being approved

Photo identification must be provided in the form of a valid driver's license, state issued photo identification card, or a military identification card. In order to help us complete your application in a timely manner, we ask that you fill it in as completely as possible. If you need to call us back with more information, please do so within the 72-hour grace period. Be sure to sign and date it where indicated. The leased address does not become effective until the application is approved by Management.

### QUALIFICATIONS

v We require that every adult individual who resides in the apartment have an approved application on file. The income required for qualification is based on your verifiable gross income. Your salary must be in line with the following amounts:

- An individual will need 2.5 - 3 times the rental amount
- Roommates will each need 2.5 times the rental amount.

The income requirements are guidelines and can be adjusted up or down, based on your individual debt load.

Employment must be verified with current employer including position, dates of employment and salary. In case of self employment, the last year's income tax returns will be required. Social Security Pension payments, stock dividends, interest income, child support, maintenance support, or any other verifiable source may be included in applicant's gross figure as long as supporting documentation can be provided.

All applications are verified through a Credit reporting agency. Unacceptable credit history can be grounds for rejection. Lack of credit history shall not be grounds for rejection. *Applicants could be rejected due to, but not limited to the following reasons.*

1. *Falsification of any information on the application*
2. *Applicant is given negative rental history or negative mortgage payment history including but not limited to: evictions, unfulfilled lease agreements, outstanding balances owed, violation of rules and regulations, or foreclosure.*
3. *Income cannot be verified*
4. *Applicant is given a negative credit history. Repossessions, evictions, foreclosures, liens, civil judgment, unpaid collection accounts, accounts paid over sixty (60) days late, and bankruptcies will be viewed as bad credit.*
5. *Criminal background - crimes that will most often allow management to deny tenancy are assault, robbery, murder, arson, rape, sale of drugs, sexual predators and offenders.*

The following exceptions may apply under certain conditions:

Co-Signer/Guarantor may be allowed for applicants who qualify in all other items other than gross monthly income. Co-signer/Guarantor is subject to all applicant requirements.

Only applicants that qualify in all items other than having a minimal negative history may be asked for an additional amount as a security deposit in order to have their application approved. Any additional deposit must be paid in the form of a Cashier Check or Money Order.

Occupancy Standards allow two persons per bedroom (plus one minor who is six (6) months of age or less. The minor must reside with his parent, guardian, legal custodian, or person applying for that status).

Soulard Market Loft Apartments will not discriminate against any person based on race, color, religion, sex, national origin, familial status, or handicap.

*In signing the application, you are aware that if the application is not approved, the application charge of \$50.00 is non-refundable. I hereby consent to allow Soulard Market Loft Apartments through its designated agent and its employees, to obtain my credit information including a criminal background search for the purpose of determining whether or not to lease to me an apartment.*

Please acknowledge (by signing below) that you have read and understand the foregoing Resident Selection Criteria.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# Soulard Market Loft Apartments Application for Rental

<u>For Office Use</u>	Application Date _____	Address Deposited On _____	MGR INITIALS _____
Move In Date _____	Lease Term _____	Rental Rate _____	Rent Concession _____
App Fee _____	Security Deposit _____	Admin Fee _____	Pet Fee _____

Applicant's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ SS# \_\_\_\_\_  
First M.I. Last

Drivers License No. & State \_\_\_\_\_ Martial Status  Sin  Mar  Div  Sep  Wid

Spouse Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ SS# \_\_\_\_\_  
First M.I. Last

Drivers License No. & State \_\_\_\_\_ EMAIL \_\_\_\_\_

<u>All other persons who will occupy Apartment</u>	<u>Relationship</u>	<u>Date of Birth</u>	<u>Student</u>	<u>Employed</u>
1. _____			<input type="checkbox"/>	<input type="checkbox"/>
2. _____			<input type="checkbox"/>	<input type="checkbox"/>

Present Address \_\_\_\_\_  
Street Apt # City State Zip

Dates: From-To \_\_\_\_\_ Monthly Payment \_\_\_\_\_ Cell # \_\_\_\_\_

Present Landlord/Resident Manager/Mortgage Co. \_\_\_\_\_ Phone \_\_\_\_\_ Rent / Own (Circle)

Reason for Moving \_\_\_\_\_ Moving From: Apt / Condo / Home / Townhouse / Other (Circle)

Previous Address \_\_\_\_\_  
Street Apt # City State Zip

Dates: From-To \_\_\_\_\_ Monthly Payment \_\_\_\_\_

Previous Landlord/Manager/Mortgage Co. \_\_\_\_\_ Phone \_\_\_\_\_ Rent / Own (Circle)

Have you, or your spouse ever been evicted for any leased premises? \_\_\_\_\_ If yes, Explain \_\_\_\_\_

RENTAL

Present Employer \_\_\_\_\_ Position \_\_\_\_\_

Business Address \_\_\_\_\_ Phone # \_\_\_\_\_  
Street City St. Zip

Supervisor or H.R. Representative \_\_\_\_\_ Dates of Employment \_\_\_\_\_

EMPLOYMENT

Previous Employer \_\_\_\_\_ Position \_\_\_\_\_

Business Address \_\_\_\_\_ Phone # \_\_\_\_\_  
Street City St. Zip

Supervisor or H.R. Representative \_\_\_\_\_ Dates of Employment \_\_\_\_\_

Spouse's Employer \_\_\_\_\_ Position \_\_\_\_\_

Business Address \_\_\_\_\_ Phone # \_\_\_\_\_  
Street City St. Zip

Supervisor or H.R. Representative \_\_\_\_\_ Employed Since \_\_\_\_\_

Spouse's Previous Employer \_\_\_\_\_ Position \_\_\_\_\_

Business Address \_\_\_\_\_ Phone # \_\_\_\_\_  
Street City St. Zip

Supervisor of H.R. Representative \_\_\_\_\_ Dates of Employment \_\_\_\_\_

Total Anticipated income form date of move-in through the next 12 month  
 Annual Salary (Including Tips, Commissions, Bonuses, and Overtime) \$ \_\_\_\_\_

Annual Salary Spouse (Including Tips, Commissions, Bonuses, and Overtime) \$ \_\_\_\_\_

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Other Income Includes: Alimony, child support, parental support, aid to dependent children, welfare, unemployment, social security, annuities, insurance policies, retirement benefits, pensions, and other regular periodic payments. If you have any questions please consult personnel for assistance.

Source of Other Income	Yearly Gross Amount	Contact	Phone
1) _____	\$ _____	_____	_____
2) _____	\$ _____	_____	_____

**BANK INFORMATION:**

Asset Type	Bank/Savings & Loan/Credit Union	Average Monthly Balance	OFFICE USE ONLY
			Yearly \$ Received Asset
1.)			
Checking Account _____	_____	_____	_____
Savings Account _____	_____	_____	_____
Other _____	_____	_____	_____
2.)			
Checking Account _____	_____	_____	_____
Savings Account _____	_____	_____	_____
Other _____	_____	_____	_____

Emergency Contact Name \_\_\_\_\_ Relationship \_\_\_\_\_  
 Address \_\_\_\_\_ Phone # \_\_\_\_\_

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Year, Make, & Model \_\_\_\_\_ Color \_\_\_\_\_ License No. & State \_\_\_\_\_  
 Year, Make, & Model \_\_\_\_\_ Color \_\_\_\_\_ License No. & State \_\_\_\_\_  
 Condition of Vehicles \_\_\_\_\_ All vehicles must be in good working order.

Do you own any Pets? \_\_\_\_\_ If So, How Many? \_\_\_\_\_ Breed \_\_\_\_\_ Weight \_\_\_\_\_ Age \_\_\_\_\_

Have you, or your spouse ever been convicted of a felony?  Yes  No If yes explain \_\_\_\_\_  
 I Certify that I was referred to this community by: \_\_\_\_\_

Applicant has submitted the sum of \$ \_\_\_\_\_ which is a non-refundable payment for a credit check and procession charge of this application. Such sum is not a rental payment or security deposit. This amount will be retained by management to cover the cost of processing application as furnished by the applicant; any false information will constitute grounds for rejection of application. I agree to pay the administration fee of \$ \_\_\_\_\_, which will be refunded to me in full if this application is not approved and accepted. Once approved, if I fail to take possession of the apartment, the administration fee will be forfeited. Upon acceptance and approval of this application, I agree to execute a lease agreement before possession is delivered and to pay the security deposit \$ \_\_\_\_\_ and other move-in costs.

I certify that the facts set forth in this application for rental are true, complete, and correct to the best of my knowledge and belief, and are made in good faith. I understand that a knowing and willful false statement on this application is grounds for rejection by the rental manager. It is understood that the Application is a part of the Lease and Resident hereby affirms that the statements and information contained in the Application are true and correct and that the Resident's authority to the Landlord to obtain credit information through the use of a Credit Reporting Agency, including, but not limited to the obtaining of a Consumer Credit Report on the Resident is a continuing right agreed upon by the Resident, including, but not limited to credit verification skip tracing, or the collection of any delinquent accounts which the Resident may maintain with the Landlord. The nature and scope of the investigation requested may include information obtained through personal interviews concerning residence verification, number of occupants, employment, occupation, habits reputation and mode of living. I agree to submit to Lessor a valid photo identification (such as a state driver's license) which will be photocopied and made a part of the application.

Signature

Date

Spouse Signature

Date



**Soulard Market Lofts**  
**1531 south 8<sup>th</sup> street**  
**St. Louis, MO 63104**  
**Phone (314) 588-9990**  
**Fax (314) 588-9066**

Employee \_\_\_\_\_

Social Security Number \_\_\_\_\_

I authorize the release of my employment information to Soulard Market Loft Apartments and its agents.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

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**DEAR EMPLOYER:**

\_\_\_\_\_ has applied for an apartment and has listed you as their current employer. We would appreciate the following information being completed by a supervisor or payroll department. This form must be signed with title and dated for us to complete our approval process.

Length of employment: \_\_\_\_\_

Position Held: \_\_\_\_\_

Gross Monthly Income: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

For your convenience please fax this form to our office at **314-588-9066**.  
Thank you in advance for your cooperation and time.



# Soulard Market Loft Apartments

1531 South Eighth St.  
St. Louis, MO 63104  
Ph. (314)588-9990  
Fax (314)588-9066

## RENTAL VERIFICATION

Date: \_\_\_\_\_

To: \_\_\_\_\_

From: \_\_\_\_\_

Fax: \_\_\_\_\_

The following applicant(s) has applied for residency. Please complete the requested rental information below and fax back as soon as possible. Thank you for your time and complete cooperation.

Applicant hereby authorizes verification of any and all information set forth in the Application for Rental, including release of information by any landlord (past or present).

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Current Resident

Previous Resident

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_ Apartment #: \_\_\_\_\_

Dates of Occupancy: \_\_\_\_\_

Rental Amount: \_\_\_\_\_

Length of Occupancy: \_\_\_\_\_

Any Lates?  Yes  No How Many? \_\_\_\_\_

NSF's?  Yes  No How many? \_\_\_\_\_

Any Pets?  Yes  No How many? \_\_\_\_\_ Size? \_\_\_\_\_

Proper Notice Given?  Yes  No

Deposit refunded?  Yes  No Would you release to them?  Yes  No

Has a dispossessionary warrant ever been filed?  Yes  No How many? \_\_\_\_\_

Is there a balance outstanding to your community?  Yes  No

**Information Given By:** \_\_\_\_\_

**Date:** \_\_\_\_\_