

## RESIDENTIAL APPLICATION FORM

☐ **ENGLAND ESTATES**

- ☐ 2-Bdrm  
☐ 3-Bdrm  
☐ 4-Bdrm

☐ **ENGLAND OAKS**

- ☐ 2-Bdrm  
☐ 3-Bdrm

☐ **ENGLAND VILLAGE**

- ☐ 3-Bdrm  
☐ 4-Bdrm

### APPLICANT INFORMATION

Legal Name of Applicant \_\_\_\_\_

Street Address \_\_\_\_\_ City/ST/Zip \_\_\_\_\_

Home Phone Number \_\_\_\_\_ Mobile Phone Number \_\_\_\_\_

Email \_\_\_\_\_

Date of Birth (mm/dd/yyyy) \_\_\_\_\_

Driver License Number \_\_\_\_\_ Social Security Number \_\_\_\_\_

### CURRENT RESIDENCE

How Long at Present Address \_\_\_\_\_ Monthly Rent: \_\_\_\_\_

Present Landlord's Name \_\_\_\_\_ Phone # \_\_\_\_\_

Landlord's Address \_\_\_\_\_ City/ST/Zip \_\_\_\_\_

### EMPLOYMENT

Employers Name \_\_\_\_\_ Phone # \_\_\_\_\_

Employers Address \_\_\_\_\_ City/ST/Zip \_\_\_\_\_

How long with current employer? \_\_\_\_\_ Annual Income: \_\_\_\_\_

## EMERGENCY CONTACT

Name \_\_\_\_\_

Address \_\_\_\_\_ City/ST/Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Relation \_\_\_\_\_

Name of nearest relative \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ City/ST/Zip \_\_\_\_\_

## OCCUPANTS

Please list the legal names of everyone who will be living with you. Start with the head of the household, then spouse or co-head, then minors (oldest to youngest), and then any other adults.

	Legal Names	Relationship to Applicant	Sex	Age	Birth Date	Occupation or School Name	Social Security Number
1.							
2.							
3.							
4.							
5.							
6.							

NOTE: \$45 Application Fee applied to each occupant in the home 18 years of age or older.

Do you expect anyone to move in or out of your home within the next twelve months? ☐ Yes ☐ No

If yes, explain: \_\_\_\_\_

Does anyone who intends to occupy the house claim mobility, visual, or hearing impairment or other special needs which would require a special type of unit or other accommodation? ☐ Yes ☐ No

If yes, please describe: \_\_\_\_\_

## PROGRAM INTEGRITY INFORMATION (These questions apply to all dwelling occupants)

Have you ever used a name other than the one you are using now? ☐ Yes ☐ No

If yes, what name? \_\_\_\_\_

Have you ever used a social security number other than the one you listed above? ☐ Yes ☐ No

If yes what is it? \_\_\_\_\_

Have you or anyone intending to occupy the house, been convicted of a disqualifying felony or presently engaged in the use, sale, manufacture or distribution of a controlled substances? ☐ Yes ☐ No

If yes, who? When? For what? \_\_\_\_\_

List all money received or earned by everyone living in household. Include all money from Employment, Self Employment, Unemployment compensation, Child Support, Regular Contributions, Social Security, SSI, Retirement, Disability, Workman's Compensation, AFDC, Veterans Benefit, Rental Property Income, Stock Dividends, interest, Alimony, Annuities and all other sources.

Occupants	Source/Employer	Rate	Type of Income	Annualized Income

Has anyone who will occupy the home applied for any benefits or money which is in the process of being approved? ☐ Yes ☐ No If yes, explain \_\_\_\_\_

Does anyone outside of your household pay for any of your bill or expenses? ☐ Yes ☐ No

Are you entitled to or receiving:

Child Support? ☐ Yes ☐ No      Alimony? ☐ Yes ☐ No      Government Allotment? ☐ Yes ☐ No

### ADDITIONAL INFORMATION

List the Number, Make and Model of all Autos, Trucks, R/V=s, Campers, Boat Trailers or Utility Trailers

LICENSE NUMBER	MAKE	MODEL

### PETS

All resident owned pets brought on any EEIDD residential premises must be registered with the England Airpark Residential Property Management office. The pet owner must agree to comply with all pet guidelines including the \$250 pet fee per pet and any other specified fees.

(See the Pet Acceptance & Retention Guidelines.)

Type	Weight	Age	Breed	Spayed/Neutered	Service Animal

## APPLICANT(S)/TENANTS(S) STATEMENT

I certify that the information on this form and all forms associated with this application are accurate and complete to the best of my knowledge and belief. I understand that false statements of information are punishable under Federal and State laws. I also understand the false statements of information are grounds for denial of housing or termination of tenancy.

This application is made with the understanding that it is to be processed for both credit and character references. I have no objection to inquiries for the purpose of verification of the above statement. This includes a BACKGROUND CHECK. It is understood that the above information will be held in strict confidence. I also understand this application is good for only six months from date of application. I must renew this application each six months thereafter if I desire my application to remain active.

Applicant: \_\_\_\_\_  
Signature Date

Co-Application: \_\_\_\_\_  
Signature Date