



Alliance Property Management Inc.

1410 Poyntz Ave.

Manhattan, KS 66502

Website: rentfromapm.com

E-Mail: alliance@rent-apm.com

Office: (785)539-2300 Fax: (785)539-8095



APPLICATIONS NEED TO INCLUDE:

- Picture ID (Driver's License, Military ID)
- Application Fee, \$20.00 per Person or \$30.00 for Family
- Security Deposit (equal to one-month's rent)
 - If Student, Co-signer information listed
 - If Non-Student, Current pay stub or LES

Your application will NOT be processed until we have ALL of the above.

Payment Options:

1. Cash or Money Order
2. You can write a check made payable to: APM or (Alliance Property Management, Inc.)

Dear Rental Applicant:

We take pride in management of our rental homes and communities. We actively seek good residents to stay in our properties, and we strive to provide the best services we possibly can while they live in the rentals we manage. We screen our applicants and verify information provided to us on the rental application you have completed and from other sources available to us. We may run a credit report, verify employment, and check previous rental history or any other information available to us.

The screening and verification process for every applicant is done in a fair, consistent and uniform manner. We work very diligently to observe both the spirit and the letter of the fair housing laws. Not only because it is the law, but because we sincerely believe, personally and as a company, in fair housing and equal opportunity for everyone. An applicant who passes the screening criteria is offered an apartment when a suitable apartment is available. An applicant who does not satisfy the screening criteria is not accepted as a resident.

By making application for an apartment in one of our rentals, you acknowledge that these checks and verifications will be done, and give your permission for us to do so. If there is any item on the application that you do not understand, please ask for assistance. We are here to be of service to you and to others seeking housing. We welcome your suggestions as to how we might do that task better and more efficiently. We'll do our best to process your application as quickly as possible and try to give you an answer as soon as possible. We sincerely hope that you will be a long-term resident with us.

Thank you for applying for one of our rentals.

GENERAL INFORMATION

Rental Property Address 1st choice: _____ Date of Application: ____/____/____
Month Day Year

Rental Property Address 2nd choice: _____

Lease Start Date: _____ **All Leases are 12 months, unless other arrangements are approved by Management.

Applicant's Name: _____ (____) _____ - _____ (Home)
First Middle Last Phone

(____) _____ - _____ (Work)
Phone

(____) _____ - _____ (Cell)
Phone

Please note which number you can best be reached at.

Date of Birth: ____/____/____ SS# _____ - _____ - _____ Driver's License #: ____/____
State Number

E-mail address: _____

Marital Status: Married () Single () Divorced () Separated () Other () _____

Spouse's Name: _____
First Middle Last

Date of Birth: ____/____/____ SS# _____ - _____ - _____ Driver's License #: ____/____
State Number

Number of Children: _____ Names: _____
First Middle Last Age

First Middle Last Age

First Middle Last Age

Any Other Persons Living With You: _____
First Middle Last

*Cosigner (Required): _____ (____) _____ - _____
Name Relationship Home Phone

Address: _____ (____) _____ - _____
Street Address City State Zip Work Phone

Email Address: _____ (____) _____ - _____
Cell Phone

Emergency Contact: _____ (____) _____ - _____
Name Relationship Home Phone

Address: _____ (____) _____ - _____
Street Address City State Zip Work Phone

Pets (List Each): _____
Type Breed Color Sex Spayed/Neutered Weight Age in Years Name

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**Please include photograph of pet(s) with application.

(WE DO NOT ALLOW ROTTWEILERS, CHOWS, PIT BULLS, DOBERMAN PINSCHERS, MASTIFFS, OR GERMAN SHEPHERDS OF ANY MIX OR FULL BREED)

Number of Vehicles: _____ List: _____
Year Make/Model Color County Tag # State

Year Make/Model Color County Tag # State

FINANCIAL INFORMATION

NON-STUDENTS ONLY

APPLICANT

CO-APPLICANT (Spouse only)

Employer: _____
Company Name

Employer: _____
Company Name

Street Address City State Zip

Street Address City State Zip

Supervisor's Name (_____) - _____
Phone

Supervisor's Name (_____) - _____
Phone

Title of Position: _____

Title of Position: _____

Length of Employment: ____/____/____ to ____/____/____

Length of Employment: ____/____/____ to ____/____/____

Monthly Salary: \$_____ Additional Income: \$_____

Monthly Salary: \$_____ Additional Income: \$_____

What Type of Additional Income: _____

What Type of Additional Income: _____

Military Rank: _____ Unit: _____

Military Rank: _____ Unit: _____

Commander: _____ (_____) - _____
Phone

Commander: _____ (_____) - _____
Phone

****Please include payroll stubs, a current SRS, SSI, Disability Statement, or LES if applicable.**

STUDENTS ONLY

Permanent Address: _____ (_____) - _____
Street Address City State Zip Phone

Father: _____ (_____) - _____
Name Street Address City State Zip Phone

Mother: _____ (_____) - _____
Name Street Address City State Zip Phone

Year in School at the present time (Circle One): Freshman Sophomore Junior Senior 5th/Other _____

Expected Date of Graduation: _____

Source of Financial Support:	Yearly
1. Financial Aid	\$ _____
2. Summer Employment	\$ _____
Company Name _____ Phone Number (_____) _____ - _____	
Length of Employment from ____/____/____ to ____/____/____	
3. School Year Employment	\$ _____
Company Name _____ Phone Number (_____) _____ - _____	
Length of Employment from ____/____/____ to ____/____/____	
4. Parental Support	\$ _____
5. Other Income, please describe _____	\$ _____
TOTAL YEARLY & MONTHLY INCOMES	\$ _____

K-State Advisor's Name _____ Phone number _____ Department _____

How did you hear about us (please circle one):

Mercury Collegian Word of Mouth Internet Our yard signs Other (please specify): _____

RENTAL REFERENCES/HOMEOWNER

Have **never** rented and have always lived with parent/guardian: _____
Name Phone Number

Or

Current Landlord: _____ (_____) - _____
Name Company Phone

Rental Address: _____
Street Address City State Zip

Rent Per Month: \$ _____ Move-In Date: ____/____/____ Move-Out Date: ____/____/____

Reason For Leaving: _____

Previous Landlord: _____ (_____) - _____
Name Company Phone

Rental Address: _____
Street Address City State Zip

Rent Per Month: \$ _____ Move-In Date: ____/____/____ Move-Out Date: ____/____/____

Reason For Leaving: _____

Or

Homeowners: _____ (_____) - _____
Mortgage Company Address Phone

Mortgage Per Month: \$ _____ Move-In Date: ____/____/____ Move-Out Date: ____/____/____

- Have you ever been evicted? Yes () No ()
Have you ever broken a lease or rental agreement? Yes () No ()
Have you ever been sued for non-payment of rent or damages to rental property? Yes () No ()
Have you ever been convicted of a felony? Yes () No ()

If "Yes" for any of the above, please explain why and provide the date of the occurrence(s) for each _____

****PLEASE READ & SIGN BELOW****

Applicant represents that all of the above statements are true and complete and hereby authorizes verification of the information, references, and credit record. Applicant acknowledges that false information herein may constitute grounds for rejection of this application, termination of the right of occupancy and/or forfeiture of deposits. Applicant is aware and understands that the application will not be processed or considered until completed, and the security deposit and application fee(s) have been paid in full. **By signing below, applicant(s) are aware that any checks will be cashed immediately, and that termination of the application by the applicant for any reason will result in forfeit of the application fee(s) and entire security deposit.**

This application is subject to acceptance by the owner and execution of a lease or rental agreement and is offered without respect to race, color, creed, sex, or national origin.

Applicant print: _____ Sign: _____ Date: _____

Co-Applicant (Spouse) print: _____ Sign: _____ Date: _____

FOR OFFICE USE ONLY

Approval Signature: _____ Date: _____

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RENTAL VERIFICATION

Date: _____, 20____

I, _____ have applied for an apartment at Alliance Property Management, Inc. I hereby give my authorization to release any information regarding my residency at the following addresses:

_____ Current Former

Dates Rented (month/year): From _____ To _____

Signature _____

To: _____ From: _____

Fax: _____ Pages: 1 Including Fax Cover Page

Phone: _____ Date: _____

Re: Rental Reference for the above mentioned

Please Fax back to APM (785) 539-8095

Please answer the following questions:

- 1. Did the tenant live at the address indicated above? Yes No
- 2. How much was the rent per month? \$ _____
- 3. Did Tenant always pay rent on time? Yes No
- 4. Any NSF fees for Tenant? If so, how many? _____ Yes No
- 5. Any Late Fees for Tenant? If so, how many? _____ Yes No
- 6. Did Tenant give proper notice to vacate the housing? Yes No
- 7. Any complaints about or problems with pets? Yes No
- 8. Any noise complaints or other complaints on record for Tenant? Yes No
- 9. Would you rent to Tenant again in the future? Yes No

Any additional comments: _____

Person verifying the information: _____ Title: _____ Date: _____

(APM Applicant for Address of: _____)