

Heritage Property Management

313 Third Avenue SE, P.O. Box 74050

Cedar Rapids, IA 52407

Phone: (319) 365-3610 Fax: (319) 362-9126

www.heritage-associates.com

hpm@heritage-associates.com

Application for Housing

Date: _____ Move-In Date: _____
Complex Name: _____ Apt. #: _____
Complex Address: _____ Lease Length: _____
Rent: _____

Applicant 1

Name: _____ Phone: (____) _____
Last First MI Email Address: _____
Social Security Number: _____ Date of Birth: _____
Present Address: _____ City: _____ State: _____ Zip: _____
Apartment or Landlord Name: _____ Phone: (____) _____
Reason for Leaving: _____
Present Employer: _____ Supervisor Name: _____
Employer Address: _____ Phone: (____) _____
Title/Position Held: _____ Length of Employment: _____ Yearly Income: _____
Have you ever had bed bugs? _____ Yes _____ No

Applicant 2

Name: _____ Phone: (____) _____
Last First MI Email Address: _____
Social Security Number: _____ Date of Birth: _____
Present Address: _____ City: _____ State: _____ Zip: _____
Apartment or Landlord Name: _____ Phone: (____) _____
Reason for Leaving: _____
Present Employer: _____ Supervisor Name: _____
Employer Address: _____ Phone: (____) _____
Title/Position Held: _____ Length of Employment: _____ Yearly Income: _____
Have you ever had bed bugs? _____ Yes _____ No

List names of all other persons that will occupy the premises other than listed above:

Name: _____ Birth date: _____ Relationship: _____
Name: _____ Birth date: _____ Relationship: _____
Name: _____ Birth date: _____ Relationship: _____

Do you have any pets? _____ Yes _____ No If Yes, Kind of Pet and Weight: _____

Do you have renters insurance? _____ Yes _____ No If Yes, please provide a copy If No, it is strongly recommended,

List of all vehicles to be kept at premises:

Make: _____ Year: _____ Color: _____ License #: _____
Make: _____ Year: _____ Color: _____ License #: _____

**\$25 APPLICATION FEE PER APPLICATION (UNLESS MARRIED) MADE PAYABLE TO:
HERITAGE PROPERTY MANAGEMENT**

Personal Information

Applicant 1 Personal References:

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

Applicant 2 Personal References:

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

Person to notify in case of an emergency:

Name: _____ Address: _____ Phone: _____

Applicant 1 Personal History:

1. Have you ever been convicted of a misdemeanor or felony (excluding minor traffic violations)? Yes ___ No ___ If yes, list date, violation & resolution: _____

2. Have you ever been convicted on a charge involving illegal use, abuse, possession, manufacture or distribution of a controlled substance OR plead "no contest" to any drug and/or alcohol charges? Yes ___ No ___ If yes, list date, violation & resolution: _____

3. Have you ever been:
Charged/convicted/pleaded "no contest" to any sex offender charges? Yes ___ No ___
Registered or required to be registered as a sex offender? Yes ___ No ___
On any state's sex offender list? Yes ___ No ___
If yes, please explain date, where, violations & resolution: _____

Applicant 2 Personal History:

1. Have you ever been convicted of a misdemeanor or felony (excluding minor traffic violations)? Yes ___ No ___ If yes, list date, violation & resolution: _____

2. Have you ever been convicted on a charge involving illegal use, abuse, possession, manufacture or distribution of a controlled substance OR plead "no contest" to any drug and/or alcohol charges? Yes ___ No ___ If yes, list date, violation & resolution: _____

3. Have you ever been:
Charged/convicted/pleaded "no contest" to any sex offender charges? Yes ___ No ___
Registered or required to be registered as a sex offender? Yes ___ No ___
On any state's sex offender list? Yes ___ No ___
If yes, please explain date, where, violations & resolution: _____

Applicant has herewith deposited the sum of \$ _____, receipt of which is hereby acknowledged as a non-interest bearing deposit (and not as a rental payment) to be refunded as hereinafter provided if the lease agreement is consummated; provided, however, that in the event the application is approved, and applicant *fails or refuses* to enter into the contemplated lease with the owner within three (3) days of being approved, then applicant agrees to forfeit the said deposit as liquidated damages and not as a penalty, to cover the cost of taking and of processing this application, reservation and preparation of the apartment, and the loss of rental income to the owners. If, however, in the event this application is disapproved or for any reason for which owner is responsible, the lease agreement is not consummated, this deposit will be returned to the applicant. **Please return application and deposit along with a copy of a valid Driver's License for each applicant.**

NOTE: This application is made with the understanding that it is subject to acceptance by the owner and subject to execution by said company and delivery of a lease covering said premises.

NOTE: No other persons than those listed on the previous page will be authorized to occupy this apartment without the consent of the owner and an appropriate adjustment in the rent.

NOTE: Keys will not be given until the lease is signed, rent is paid, and apartment is readied for occupancy.

The undersigned represent that all information statements are true and complete, and does authorize verification of information and references given.

Applicant (1)

Applicant (2)

Heritage Property Management

HERITAGE ASSOCIATES CORPORATION

Property Management Division

THE HERITAGE BUILDING
313 - 3RD AVENUE SE
P.O. BOX 74050
CEDAR RAPIDS, IOWA 52407
PHONE (319) 365-3610 FAX (319) 362-9126

RENTAL VERIFICATION

APARTMENT NAME/ADDRESS: _____

LANDLORD: _____ CIRCLE ONE
FAX/PHONE #: _____

Please verify rental information for _____
As per the signature authorization as soon as possible and fax to (319) 362-9126.

****FOR PROPERTY MANAGERS ONLY****

1. Move in Date: _____
2. Lease Expiration Date: _____
3. Did they give 30 day notice: _____
4. Amount of monthly rent: _____
5. Number of late payments: _____
6. Number of NSF Checks: _____
7. Legal notices or actions: _____
8. Noise complaints: _____
9. Other problems: _____
10. Condition of apartment: _____
11. Would you rent to them again: _____
12. Has tenant ever had an issue with bed bugs: _____
13. Comments: _____

THANK YOU FOR YOUR HELP. IT IS APPRECIATED!

Reference given by: _____
Title: _____

**I hereby give permission for Landlords to release rental information concerning me to Heritage Property Management.

Residents Signature _____ Date _____

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313 - 3RD AVENUE SE
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EMPLOYMENT VERIFICATION

EMPLOYER: _____

SUPERVISOR: _____ CIRCLE ONE
FAX/PHONE #: _____

Please verify employment information for _____
As per the signature authorization as soon as possible and fax to (319) 362-9126.

*****FOR YOUR EMPLOYERS USE ONLY***:**

Employer Phone Number: _____

Length of Employment: _____

Position or Title: _____

Full or Part Time: _____

Average Number of hours per week: _____

Monthly Net Income: _____

Comments: _____

THANK YOU FOR YOUR HELP. IT IS APPRECIATED!

Reference given by: _____

Title: _____

**I hereby give permission for employers to release employment information concerning me to Heritage Property Management.

Applicant Signature _____ Date _____

GENERAL INFORMATION

Landlords of Iowa, Inc.

Applicant's signature on Application authorizes management to check references including:

- Credit report **~WE NEED A COPY OF A VALID PHOTO ID FOR EACH ADULT**
- Criminal checks
- Income verification **~MUST MAKE 3 TIMES AMOUNT OF RENT (RENT x 3.3 x 12)**
- Employment and/or student verification
- Previous landlords or program participation
- County courthouse records for Small Claims filed
- County courthouse records for Money Judgements
- Law enforcement with jurisdiction over previous address
- Others as deemed pertinent for Application

Iowa Code Chapter 216, Iowa's anti-discrimination law, **DOES NOT AFFECT:**

216.20 "Tenancy of an individual that would constitute a direct threat to the health and safety of other individuals or tenancy that would result in substantial physical damage to the property of others."

Be advised that management will **NOT**:

1. Rent to persons who lie on their Applications
2. Continue tenancy with persons who management later learns lied
3. Rent to persons who have recent convictions for felonies and Aggravated misdemeanors including any drug-related crimes and sex offenders
4. Continue tenancy with persons who are currently convicted for felony and aggravated misdemeanor violations
5. Rent to, or continue tenancy, with persons who entertain guests with recent conviction for felonies and aggravated misdemeanors
6. Rent to persons with a history /habit of poor credit
7. Continue tenancy with persons who disregard provisions of the Rental Agreement or who cause property destruction or disturbances.
8. Rent to persons who have had issues with bed bugs in the past.

Management considers felonies and aggravated misdemeanors such as this list unacceptable behavior/activity/involvement for tenants of this property:

- Assault/personal injury
- Prostitution
- Criminal mischief/vandalism/property damage
- Arson or trespass
- Drug use/drug trafficking/drug manufacturing
- Child molestation/endangerment/neglect/sex offenders
- Domestic violence
- Breaking and entering
- Theft/burglary/stolen property
- Illegal use of firearms/guns
- Stalking/kidnapping/rape/sexual abuse

"I have read this sheet."

Applicant

Signature _____

Date _____