



MALLARD LAKE APPLICATION FOR AUTHORIZED OCCUPANCY

APPLICATION DATE _____

\$20 Occupancy Fee Paid _____ IDENTIFICATION VERIFIED _____

PLEASE COMPLETE EVERY QUESTION

(EACH ADULT OCCUPANT OVER THE AGE OF 18 MUST SUBMIT A SEPARATE APPLICATION)

MOVE-IN DATE _____ LEASING AGENT _____

APPLYING FOR ADDRESS _____, WHEELING, IL 60090

CURRENT LEASEHOLDER'S NAME _____

APPLICANT INFORMATION

_____ FULL-TIME OCCUPANCY _____ PART-TIME OCCUPANCY (LESS THAN 2 NIGHTS PER WEEK)

NAME (LAST) _____ (FIRST) _____ (M) _____ GENERATION (Jr., Sr.) _____

DOB ____/____/____ AGE _____ SOCIAL SECURITY # _____ - _____ - _____ SEX _____ MARITAL STATUS _____ (Optional)

OCCUPATION: _____ TOTAL ANNUAL INCOME (From all sources) \$ _____

DRIVER'S LICENSE # _____ STATE _____ EXPIRATION DATE _____

OR GOVERNMENT PHOTO ID # (IF APPLICABLE) _____ EXPIRATION DATE _____

E-MAIL: _____ HOME PHONE # _____

CELL PHONE # _____ WORK PHONE # _____

ARE YOU A U.S. CITIZEN? YES NO PASSPORT #: _____ WORK VISA #: _____

VEHICLES

(LIMIT TWO (2) PER APARTMENT)

TYPE	COLOR	MAKE/MODEL	LICENSE PLATE #	STATE	YEAR

RESIDENCY HISTORY

NOTE: PLEASE PROVIDE OCCUPANCY HISTORY FOR PREVIOUS TWO YEARS

PRESENT ADDRESS:

STREET _____ APT # _____

CITY _____ STATE _____ ZIP _____ HOME PHONE # _____

PREVIOUS ADDRESS (If less than two years at present address):

STREET _____ APT # _____

CITY _____ STATE _____ ZIP _____ HOME PHONE # _____

MALLARD LAKE APARTMENTS
Live Smart at Mallard Lake!

RELATIVES/EMERGENCY CONTACT (NOT RESIDING WITH YOU)

NAME _____ RELATIONSHIP _____ PHONE # _____
 STREET _____ CITY _____ STATE _____ ZIP _____
 NAME _____ RELATIONSHIP _____ PHONE # _____
 STREET _____ CITY _____ STATE _____ ZIP _____

ADDITIONAL INFORMATION

PLEASE CHECK ALL THAT APPLY

- I HAVE A WATERBED I HAVE A FISH TANK I HAVE A PET (NEED TO COMPLETE AGREEMENT) I HAVE A SATELLITE DISH (NEED TO COMPLETE AGREEMENT)

NOTE: IF YOU HAVE A PET OR SATELLITE DISH, ADDITIONAL FEES/DEPOSITS ARE REQUIRED. RESIDENCY IN A PET DESIGNATED BUILDING IS REQUIRED FOR A PET. RENTER'S INSURANCE IS REQUIRED IF YOU HAVE A WATERBED, SATELLITE DISH, OR 20-GALLON FISH TANK. PROOF OF INSURANCE MUST BE PROVIDED PRIOR TO MOVE-IN.

1. HAVE YOU EVER BEEN **CONVICTED OF A CRIME/MISDEMEANOR/FELONY**? YES NO
 (PLEASE REFER TO RENTAL POLICY FOR MANAGEMENT PROCEDURES IF THESE APPEAR ON A BACKGROUND CHECK)
2. HAVE YOU EVER BEEN **EVICTED/SERVED A 5- OR 10-DAY NOTICE** FROM ANOTHER APARTMENT COMPLEX? YES NO

THE CIVIL RIGHTS ACT OF 1968, AS AMENDED BY THE FAIR HOUSING AMENDMENTS ACT OF 1988, PROHIBITS DISCRIMINATION IN THE RENTAL OF HOUSING BASED ON RACE, COLOR, RELIGION, SEX, HANDICAP, FAMILIAL STATUS OR NATIONAL ORIGIN. THE FEDERAL AGENCY WHICH ADMINISTERS COMPLIANCE WITH THIS LAW IS THE U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT.

I, the undersigned applicant, represent that all of the above statements are true and correct and hereby authorize verification of the above information. If such information proves to be false or misleading, the owner shall have the right to deny this application. The undersigned applicant hereby consents to allow the owner, Mallard Lake Apartments, itself or through its designated agents or employees, to obtain a consumer report and criminal record and to obtain and verify credit and employment information for the purpose of determining whether to lease an apartment to the applicant. The undersigned applicant agrees and understands that the owner and its agents and employees may obtain additional consumer reports and criminal record in the future to update or review my account. Upon my request, the owner will tell me whether consumer reports or criminal records were requested and the names and addresses of any consumer-reporting agency that provided such reports. The undersigned applicant understands that the application fee is non-refundable.

APPLICANT SIGNATURE _____ DATE _____

MALLARD LAKE AGENT _____ DATE _____