

## LPC QUICK CHECK APPLICATION

**The most recent 2 years resident history required. Must provide dates of residency, landlord names and phone numbers for all addresses. The application cannot be submitted for processing until all information is provided.**

Property Name \_\_\_\_\_ Unit # \_\_\_\_\_ Rent Amount \_\_\_\_\_ Move in Date \_\_\_\_\_

Last Name	First Name	Middle/Maiden	Suffix
Social Security #	Date of Birth	Driver's License #	State
Spouse Last Name	First Name	Middle/Maiden	Suffix
Social Security #	Date of Birth	Driver's License #	State

Are you a US Citizen?     YES     NO

**Current Address**    *LPC requires at least 2 years resident history. For additional addresses, see supplemental address information on page 2. List all addresses that may be reported by a credit agency.*

Street Address		Apt #	City	State	Zip
City /ST/Zip		State	Zip		
Home Phone	Work Phone	E-mail			
Landlord / Mortgage Name	Phone #	Move In Date			
Mortgage Co.info	Name	Phone No.			

**Total Gross Monthly Income**    \$   

**Emergency Contact** (Will be the person listed on the lease as the emergency release representative)

Name	Phone
Address	City    State    Zip

Phone

### SUPPLEMENTAL INFORMATION

Current Employer	Personnel Phone #	Hire Date
Address	City	State    Zip
City/State/Zip	Phone No.	Number:
Position	Gross Monthly Income	Supervisor Name

Employment Dates:    From:  To:

Spouse Current Employer	Personnel Phone #	Hire Date
Address	City	State    Zip
Position	Gross Monthly Income	Supervisor Name

Vehicle Information	License #	State	Year
	Make	Model	

Pet Information	Type/Breed	
	Height/Weight	lbs. inches

**Roommates / Occupants Names and Birthdates (List only those that are applying with you today)**

	DOB:
	DOB:
	DOB:

**Renter's Insurance** Do you carry renter's insurance? Yes \_\_\_\_\_ No \_\_\_\_\_

Carrier \_\_\_\_\_ Agent \_\_\_\_\_ Phone \_\_\_\_\_

I do not and cannot protect any personal belongings against burglary, vandalism, personal liability insurance, I may be liable to third parties and to the property owner are covered by renter's insurance.

**STRONGLY RECOMMEND THAT RESIDENT SECURES INSURANCE.**

Have you, your spouse, roommate or occupant listed on this application ever been: Evicted or asked to move out? \_\_\_\_\_

Sued for non-payment of rent? \_\_\_\_\_ Sued for damage to rental property? \_\_\_\_\_ Convicted of a criminal offense? \_\_\_\_\_

Received deferred adjudication? \_\_\_\_\_. If yes please explain, year location and type of each: \_\_\_\_\_

**Never is "No" to any question left blank.**

LPC and Applicant acknowledge that Applicant has paid a non-refundable processing fee of \$ \_\_\_\_\_. LPC acknowledges that Applicant has also paid a holding deposit in the amount of \$ \_\_\_\_\_. If Applicant fails or refuses, for any reason, to occupy the apartment and notifies LPC within 48 hours after signing the application of their intention not to occupy the apartment, the holding deposit will be returned. If the Applicant fails to notify LPC of their cancellation within 48 hours of signing the Application, and fails to occupy the apartment, Lessor/Owner shall be entitled to damages of \$ \_\_\_\_\_ as administrative costs in addition to any and all damages provided for in the Lease Contract, including but not limited to damages for lost rent due to Applicants breach of Lease. Applicant, Owner and LPC agree these administrative costs are a reasonable forecast of the expenses incurred as a result of Applicant's failure to occupy the apartment and in no event will be considered a penalty. All parties agree this sum is an enforceable liquidated damage amount. If the Applicant is approved, the holding deposit will be applied to the deposit upon commencement of the lease.

**plete. You are hereby authorized to make any investigation of my**

**gh any investigation of credit agencies or bureaus of your choice.**

Resident Signature: \_\_\_\_\_

Date \_\_\_\_\_

Spouse Signature: \_\_\_\_\_

Date \_\_\_\_\_

LPC QUICK CHECK APPLICATION			
Last Name	First Name	Middle/Maiden	Suffix

**ADDITIONAL ADDRESS INFORMATION**

**Previous Address 1**

Street Address	Apt #	City	State	Zip
Home Phone	Work Phone	E-mail		
Landlord / Mortgage Name	Phone #	Dates: From	To	

**Previous Address 2**

Street Address	Apt #	City	State	Zip
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Faxed to Lincoln Check by

Attach confirmation from fax machine to back of application

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

Time: \_\_\_\_\_

## **LEASE CONTRACT GUARANTY**

*Please read the following carefully before proceeding to the next page.*

You, as guarantor signing this Lease Contract Guaranty, unconditionally guarantee all obligations of resident(s) under the Lease Contract listed on the following page, including but not limited to rent, late fees, property damage, repair costs, animal violation charges, reletting charges, utility payments and all other sums which may become due under the Lease Contract. You agree that your obligations as guarantor will continue and will not be affected by amendments, modifications, roommate changes or deletions, unit changes, or renewals in the Lease Contract which may be agreed to from time to time between resident(s) and us.

If we, as Owner of the dwelling, delay or fail to exercise lease rights, pursue remedies, give notices to you or make demands to you as guarantor, you will not consider it as a waiver of our rights as owner, against you as guarantor. All of our remedies against the resident(s) apply to guarantor as well. All residents, guarantors and guarantor's spouse are jointly and severally liable. It is unnecessary for us to sue or exhaust our remedies against residents in order for you to become liable. This Guaranty is part of the Lease contract and shall be performed in the county where the dwelling unit is located.

You represent that all information submitted by you on this Guaranty is true and complete, and that you will inform us of any change of address. You authorize verification of such information via consumer reports, rental history, reports and other means. A facsimile signature by you on this Guaranty will be just as binding as an original signature. It is not necessary for you, as guarantor, to sign the Lease Contract itself or to be named in the Lease Contract. This Guaranty does not have to be referred to in the Lease Contract. It is not legally necessary for this Guaranty to be notarized. Payments under this Guaranty must be mailed or made in the county where the dwelling unit is located. We recommend that you obtain a copy of the Lease Contract and read it carefully, however this Guaranty applies even if you do not do so. We will furnish you a copy of the Lease upon written request. You acknowledge that our privacy policy is available to you.

**Community Name:** \_\_\_\_\_

**Lessee Name:** \_\_\_\_\_

**Initial Lease Dates:** \_\_\_\_\_

**Monthly Rent Amount:** \_\_\_\_\_

**GUARANTOR APPLICATION**

Name: \_\_\_\_\_  
Last First Middle Jr./Sr. Etc.

Current Address: \_\_\_\_\_

Phone Number (home): ( ) \_\_\_\_\_ | (work): ( ) \_\_\_\_\_

Drivers License No: \_\_\_\_\_ | State \_\_\_\_\_ | Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_

Sex: \_\_\_\_ M \_\_\_\_ F | Marital Status: \_\_\_\_ single \_\_\_\_ married \_\_\_\_ divorced \_\_\_\_ widowed \_\_\_\_ separated

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

Do you own or rent? \_\_\_\_ own \_\_\_\_ rent If renting, please give name of the apartment community: \_\_\_\_\_

Community Name \_\_\_\_\_ Community/Landlord's Phone Number \_\_\_\_\_

If you own a house, please give the following mortgage information:

Mortgage Company \_\_\_\_\_ Your Account No. \_\_\_\_\_ Company Phone No. \_\_\_\_\_

Your Relationship to Applicant/Resident: \_\_\_\_\_

Employment Information: Employment Dates: From: \_\_\_\_\_ To: \_\_\_\_\_

Company Name \_\_\_\_\_ City, ST \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone No. \_\_\_\_\_

Position Held \_\_\_\_\_ /yr \_\_\_\_\_ Gross Income/yr \_\_\_\_\_ Supervisor's Name \_\_\_\_\_ Supervisor's Phone # \_\_\_\_\_

If self employed, give name and number bank or accountant to verify income: \_\_\_\_\_

Bank Information:

Bank Name: \_\_\_\_\_ City, State \_\_\_\_\_

List all major credit cards in your name: \_\_\_\_\_

The facts set forth in my application are true and complete. You are hereby authorized to make investigation of my rental history, employment and credit records through any investigative or credit agencies of your choice. **NO CHANGES TO THIS FORM ARE PERMITTED.**

**Guaranty of Lease**

I hereby guarantee prompt payments of all sums due Lincoln Property Company/Agent from \_\_\_\_\_ (Resident) by virtue and in full performance of the lease contract beginning: \_\_\_\_\_. In multiple occupancy, each Resident or Guarantor is jointly and severally liable for all sums due under the lease.

Signature of Guarantor

Date Signed

*Return this completed page to the community.*

**LPC SUPPLEMENTAL APPLICATION for NON US CITIZENS**

**PLEASE PRINT ON LEGAL SIZE PAPER.** Please complete this form in its entirety. We are asking all individuals who indicate they are non-US citizens for this information to verify legal entry and residency in the US for the length of the lease term. This information will not be shared except in cooperation with authorized government officials. Lincoln Property Company does not discriminate based on race, color, religion, sex, national origin, handicap or familial status.

Property Name \_\_\_\_\_ Unit # \_\_\_\_\_ Move in Date \_\_\_\_\_

Last Name	First Name	Middle/Maiden	Suffix
Spouse Last Name	First Name	Middle/Maiden	Suffix

**SUPPLEMENTAL INFORMATION ABOUT YOU**

**If any document listed below expires during the lease term, the application will not be approved.**

Place of birth, including city, state, region and country. \_\_\_\_\_

Please list any other countries in which you are a citizen. \_\_\_\_\_

Provide months and years since you have been in the United States \_\_\_\_\_

Have you ever been asked or ordered by a representative of any government agency to leave the U.S. or a  
If yes, please state when and what country or countries. Yes \_\_\_\_\_ No \_\_\_\_\_

Please tell us the U.S. Immigration and Naturalization Service (INS) document that entitles you to be in the United States:

\_\_\_\_\_ Form I-551 Permanent Resident Card (Alien Registration Card)

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

\_\_\_\_\_ Form I-688 Temporary Resident Card

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

\_\_\_\_\_ Form I-688A Employment Authorization Card

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

\_\_\_\_\_ Form I-94 Arrival Departure Record      Entry Status: \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Country issuing your passport: \_\_\_\_\_ Passport number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

\_\_\_\_\_ INS receipt for replacement of one of the above documents, with verifications by INS of your entitlement to the above.

\_\_\_\_\_ Do you have a visa?      Yes \_\_\_\_\_ No \_\_\_\_\_

    If yes, what type of visa? (student, work, visitor, other) \_\_\_\_\_

    Visa Expiration date: \_\_\_\_\_

**SUPPLEMENTAL INFORMATION ABOUT YOUR SPOUSE**

**If any document listed below expires during the lease term, the application will not be approved.**

Place of birth, including city, state, region and country. \_\_\_\_\_

Please list any other countries in which you are a citizen. \_\_\_\_\_

Provide months and years since you have been in the United States \_\_\_\_\_

Have you ever been asked or ordered by a representative of any government agency to leave the U.S. or a  
If yes, please state when and what country or countries. Yes \_\_\_\_\_ No \_\_\_\_\_

Please tell us the U.S. Immigration and Naturalization Service (INS) document that entitles you to be in the United States:

\_\_\_\_\_ Form I-551 Permanent Resident Card (Alien Registration Card)

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

\_\_\_\_\_ Form I-688 Temporary Resident Card

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

\_\_\_\_\_ Form I-688A Employment Authorization Card

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

\_\_\_\_\_ Form I-94 Arrival Departure Record      Expiration Date: \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Country issuing your passport: \_\_\_\_\_ Passport number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

\_\_\_\_\_ INS receipt for replacement of one of the above documents, with verifications by INS of your entitlement to the above.

\_\_\_\_\_ Do you have a visa? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, what type of visa? (student, work, visitor, other) \_\_\_\_\_

Visa Expiration date: \_\_\_\_\_

**The facts set forth in my Application are true and complete. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigation of credit agencies or bureaus of your choice.**

**We will require a photocopy of any of the INS documents checked above and your passport and visa.**

Resident Signature: \_\_\_\_\_

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

Spouse Signature: \_\_\_\_\_

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

