RENTAL POLICY

We require the following approval to reside at our properties.

INCOME

Applicant or Applicant and Spouse's combined income must be 3 times the monthly rent amount.

If a roommate, each applicant must make 3 times 75% of the total monthly rent.

If applicant is retired, then ratio required is 2 times the monthly rent.

If applicant has been on their job for over 18 months, then ratio is lowered to 2.5.

If applicant's total obligations from credit report is below 25% of income, then ratio is 2.5.

Income amounts must be verified in writing, applicant may provide recent pay stubs.

If applicant is self employed, then most recent tax returns or statement from CPA must be provided.

IF APPLICANT IS A STUDENT, BOTH PARENTS MUST GUARANTY THE RENTAL AGREEMENT.

SUPPLEMENTAL INCOME

All supplemental income must be verified in writing.

All verifiable bank accounts and investment accounts are assumed to earn 1% per year.

RENTAL HISTORY

Applicant must have 24 or more months verifiable rental/mortgage history during the past 3 years with a maximum of 2 late payments / NSF during the past 12 months.

Applicant must have 18 months of rental history with no late payments or NSF.

Applicant must have no lease violations requiring legal notice.

Applicant must not receive a "No" answer to question, "Would you re-rent."

If applicant has rented from a private landlord the past 12 months, then applicant must provide most recent 12 cancelled checks or money order receipts of rental payments made to private landlord.

CREDIT HISTORY

Applicant must have a satisfactory credit rating of report obtained from major credit bureau.

If applicant does not meet the above criteria, then an additional deposit or co-signer may be required for approval.

In addition to above criteria, applicant must meet below criteria, or application will be denied.

CRIMINAL HISTORY

Applicant must not have a felony record that was adjudicated guilty or had adjudication withheld for the past 7 years, or any conviction of any length of time for any drug related, sexual related, physical or violent criminal offense, murder related or arson related crime.

EVICTION / BROKEN LEASE

| years. | been evicted of moved out w | vitnout notice from any residence t | ne past 7 |
|-----------|-----------------------------|-------------------------------------|-----------|
| Applicant | Date | Spouse/Roommate | Date |
| RELEASE | OF INFORMATION | N AND AUTHORIZATION | ON |

FOR VERIFICATION OF APPLICATION $\underline{PLEASE\ PRINT}$

Unmarried co-applicants must fill out a separate release

| Name | | SS | S# | | DOB | |
|--|-----------------|---------------------|-----------------|---------------|------------------|--------------------|
| Last | First MI | | | | - - | |
| Spouse | | | SS# | |] | DOB |
| Last | First MI | | | | | |
| Present Address | | | ot # City | | | |
| | | | • | | State | Zip |
| E-Mail Address | | | | · | | |
| Please provide a p | revious address | if you have lived o | it your current | address for | less than 24 | months. |
| Previous Address | S | | | | | |
| | Street | Aŗ | ot # City | | State | Zip |
| Have you ever ha | | • | | Vac | No | |
| Applican | t: Yes | NO | Spouse: | 1 es | No | |
| Have you ever le | ft owing money | to any owner or | | | | |
| Applican | t: Yes | No | Spouse: | Yes | No | |
| Have you applied | d for residency | anywhere in the | oast 2 years, b | out did not r | nove in? | |
| | | No | | | | |
| Have you area he | d adiudiaatian | vyithhald on hoom | | a anima a ? | | |
| Have you ever ha | • | No | | | No | |
| 11 | | | 1 | | | |
| IF YOU HAVE | | | | | | |
| EXPLAIN IN D BACK OF THIS | | | | | <u>E SITUATI</u> | ION ON THE |
| DACK OF TIME | SHELT OK | ON AN ADDIT | IONAL BIIL | • | | |
| Applicant(s) repr | | | | | | |
| true and complete | | | | | | |
| all information re records, court rec | | | | | | |
| to disclose all inf | | | | | | |
| but not limited to | | | * | | | |
| omitted informat | * | | | * * | • | |
| occupancy, and/o | • | | • | | | |
| of the State of Flo | | | • | | | |
| the event you re | ceive a facsimi | ile of this author | ization, it sho | ould be trea | ited as an o | riginal and the |
| requested inform | ation should be | released to facil | itate my/our a | pplication f | for residency | / . |
| Signature of App | licant | | | Date | | |
| | | | | | | |
| Signature of Spor | use | | | Date | e | |
| | | | | | | Revised 01/01/2011 |