

FPI RENTAL APPLICATION - TAX CREDIT

Apartment Community Name COPPER RIDGE

A separate application is required from each occupant 18 years of age or older.

Applicant - Last	First	Initial	Marital Status	Drivers License #	Social Security #	Date of Birth
Other Residents				Relationship	Social Security #	Date of Birth
				Relationship	Social Security #	Date of Birth
				Relationship	Social Security #	Date of Birth
				Relationship	Social Security #	Date of Birth
				Relationship	Social Security #	Date of Birth
				Relationship	Social Security #	Date of Birth

Do you anticipate the addition of any new household members in the next 12 months? (Circle) **YES / NO**

If YES please explain:

Do you need an accessible unit? Yes No If yes, please check one: Mobility Sensory

Residence History - Please provide all residence history for past 2 years.

Current Address	Address, City, State, Zip			Phone
	Move-In Date	Projected Move-Out Date	Monthly Payment	Own/Rent/Lease
	Landlord or Mortgage Co.		Address, City, State, Zip	Phone
	Reason for Moving			

Previous Address	Address, City, State, Zip			Phone
	Move-In Date	Move-Out Date	Monthly Payment	Own/Rent/Lease
	Landlord or Mortgage Co.		Address, City, State, Zip	Phone
	Reason for Moving			

Previous Address	Address, City, State, Zip			Phone
	Move-In Date	Move-Out Date	Monthly Payment	Own/Rent/Lease
	Landlord or Mortgage Co.		Address, City, State, Zip	Phone
	Reason for Moving			

Income

Current Employer (If Employed)	Employer Name		Address, City, State, Zip		Phone
	Supervisor Name		Start Date	Salary per Year, Month, Hour (Circle One)	Position/Occupation

Income	Source of Income		Income - Yearly, Monthly, Hourly (Circle One)		Phone
	Address, City, State, Zip			Comment:	

Income (For additional, please attach a separate sheet of paper)	Source of Income		Income - Yearly, Monthly, Hourly (Circle One)		Phone
	Address, City, State, Zip			Comment:	

Vehicles

Auto #1 - Make	Model	Year	Color	License	State
Auto #2 - Make	Model	Year	Color	License	State

Miscellaneous

Have you ever been evicted or asked to move?	Describe:
Will you have any animals?	Describe Animal(s):
Do you currently have bedbugs in your existing residence?	Describe:
Will you have any liquid furniture?	Describe:
Will you be installing a satellite dish?	

Emergency Contact

Name of Nearest Relative/Contact	Relationship	Address, City, State, Zip	Phone

NON-REFUNDABLE APPLICATION PROCESSING FEE \$ 35.00 _____

FAIR CREDIT REPORTING ACT & INVESTIGATIVE CONSUMER REPORTING AGENCY ACT: In compliance with the Fair Credit Reporting Act and the Investigative Consumer Reporting Agency Act, Applicant hereby authorizes Landlord/Manager (and their agents) to verify the information above and to obtain reports necessary to verify the above information, which may include credit reports, investigative consumer reports, unlawful detainer (eviction) reports, bad check searches, social security number verification, income verification (including employment verification, if applicable) and previous tenant history. Applicant releases and agrees to defend, hold harmless and indemnify Landlord/Manager, their agents, servants and employees from and against any and all liability, legal proceedings and costs including attorney's fees arising out of verification of the information contained in this application and supporting documentation.

This property follows all fair housing laws and does not discriminate against applicants or residents based on race, color, religion, national origin, sex, familial status, handicap/disability or any other protected class covered by relevant state and/or local fair housing laws. In addition, the owners of this apartment community have a legal obligation to provide "reasonable accommodation" to applicants and residents if they or any member of their household have a qualified disability or handicap and request a reasonable accommodation.

I understand that any change to my household income, assets, student status and/ or other compositions after the date of my signature, but prior to initial occupancy must be disclosed immediately to management staff.

I understand that I acquire no rights in an apartment until a fully executed rental agreement has been completed and all monies due have been paid. I certify that to the best of my knowledge, all statements are true and complete.

Applicant Signature	Date
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Email Address & Contact Phone #:

FPI Management, Inc.

FPI-Rental Application (Tax Credit) Version 05222018

