

Philtower

River City Development, LLC

427 South Boston Ave #915 Tulsa, OK 74103

Phone: (918)584-0331 info@philtower.com

QUALIFICATIONS AND RESTRICTIONS

Applicants for rental of a dwelling unit are subject to approval as follows:

Income: The total gross monthly income of the applicant(s) must be equal or exceed an amount equal to three (3) times the rental for that particular dwelling unit. Co-signor's are accepted; however the gross monthly income of the co-signor must equal or exceed five (5) times the rental for that particular dwelling.

Credit: CREDIT INFORMATION ON EACH APPLICANT WILL BE OBTAINED THROUGH A NATIONAL CREDIT-REPORTING AGENCY. CREDIT HISTORY SHOULD POSITIVELY REFLECT THE APPLICANT 'S ABILITY AND WILLINGNESS TO MAKE PAYMENTS AS REQUIRED BY THE LEASE.

Rental Record: A satisfactory reference from previous landlord, i.e., compliance with the requirements of the lease as to payment of rent and observance of other obligations of the tenant specified therein.

Security Deposit:

Upon disapproval, any security deposit you have paid will be refunded. If your application is approved, the Security Deposit will be held until you vacate the premises. At that time, your Security Deposit, in addition with any interest due will be refunded in compliance with the terms of your lease and applicable Oklahoma Statutes.

Pets:

We allow CATS and DOGS ONLY, subject to breed restrictions and approval by management. We do charge a nonrefundable \$250 pet fee due at move-in. Additional fees may be incurred in the event of damage to property, or for cleaning and extermination and will be deducted from your security deposit.

LEASE, RULES AND REGULATIONS

All applicants must sign a lease and related rules and regulations before occupancy. We expect full compliance with these documents by all residents. Copies of these may be obtained from the rental staff for your preview.

SIGNATURE OF APPLICANT

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APPLICATION FEES ARE NON-REFUNDABLE

DATE OF APPLICATION: _____ APT DESIRED: _____ DATE DESIRED: _____

APPLICATION FEE REQUIRED: \$50 ADMINISTRATION FEE: \$149 RENT AMOUNT: \$ _____

LEASE TERM DESIRED: _____ Security Deposit Required: \$ _____

****ALL ITEMS MUST BE FILED OUT****

NAME

LAST FIRST MIDDLE DATE OF BIRTH SOCIAL SECURITY NO.

CURRENT ADDRESS

NUMBER & STREET NAME CITY STATE ZIP HOW LONG?

NAME OF APTS/ RENTAL AGENT/LANDLORD EMAIL/TELEPHONE \$ RENT RATE

PREVIOUS ADDRESS (IF CURRENT ADDRESS IS LESS THAN ONE YEAR)

NUMBER & STREET NAME CITY STATE ZIP HOW LONG?

NAME OF APTS/RENTAL AGENT/LANDLORD EMAIL/TELEPHONE \$ RENT RATE

EMPLOYMENT

(1) _____
CURRENT EMPLOYER HOW LONG? TELEPHONE

BUSINESS ADDRESS CITY STATE ZIP

YOUR POSITION \$ SALARY

(2) _____
ADDITIONAL SOURCE OF INCOME \$ AMOUNT

ARE YOU A PET OWNER? NO YES IF SO, WHAT BREED: _____ WEIGHT _____ AGE _____

NOTICE REQUIRED UNDER THE FCRA

I understand that under the FCRA, I have the right to receive a free copy of my credit report from In depth Profiles, Inc., a consumer reporting agency, or from my prospective landlord if a credit report is obtained in connection with my application for residence in the Philtower Lofts. If a credit report is not obtained, I understand that I will not receive a copy.

___ I do not wish to receive a copy of my credit report. ___If a credit report is obtained, please have a free copy sent to me.
___My prospective landlord will furnish me a copy of the credit report which was ordered.

I/We declare that all the information above is accurate and complete. I/We understand and agree that if any of the information is found to be false or incomplete, the landlord will have the right to reject this application and terminate the lease agreement with immediate effect. I/We hereby authorize the landlord to run any credit check on me/us to verify any of the above information with relevant third parties such as landlords, banks, creditors or other persons.

I understand an investigative consumer report may be requested with respect to my application to become a tenant at The Philtower. I also understand that requests may be made from public or private sources, including, but not limited to: Criminal or Civil Records, Credit Reports Employment and Professional Licensing. I also acknowledge that a fax (telephone facsimile) shall be as valid as the original. All information to be

requested shall be in compliance with the Fair Credit Reporting Act (FCRA), Federal Americans with Disabilities ACT (ADA), and all applicable state laws. My signature below hereby fully releases and holds harmless INDEPTH PROFILES, INC. and Hidde & Associates from any damages resulting from the information being provided. I hereby authorize, without reservations, any employer, law enforcement agency, credit bureau, institution or information service provider contacted by INDEPTH PROFILES, INC. to furnish any and all information as described above.

SIGNATURE OF ALL ADULTS TO APPEAR ON LEASE

_____ SIGNATURE OF APPLICANT	_____ SIGNATURE OF APPLICANT
_____ DAYTIME CONTACT NUMBER	_____ DAYTIME CONTACT NUMBER
_____ EMAIL ADDRESS	_____ EMAIL ADDRESS

RENTAL VERIFICATION

Name of applicant (Please print) _____

I hereby authorize release of the information requested below for my CURRENT rental address at:

Street	City	State	Zip
Applicant's Signature		Date	

LANDLORD (Tenant do not go below this line)

Please note if the applicant is a ___ current resident or a ___ past resident (check one) at your community.

Move –In Date: _____ Lease Ending Date: _____

Amount of Rent: \$ _____

of Late Payments: _____

- Has Proper Notice Been Given? ___ YES ___ NO
- Is there currently any past due amount owed on the resident's account? ___ YES ___ NO
- Has the resident complied with all community policies? ___ YES ___ NO
- Does this resident keep an animal on the premises? ___ YES ___ NO
- Has the animal at any time caused a problem or been a nuisance? ___ YES ___ NO
- Have legal proceedings ever been filed on this resident? ___ YES ___ NO
- Is resident eligible for re-rental? ___ YES ___ NO

Date

Signature