Timbers at Rayleigh

Thank you for your interest in our community!

Welcome to Timbers at Rayleigh! Thank you for picking up an application. Be sure to read the application instruction page to help you complete your application. Do not hesitate to contact us with any questions.

1 Bedroom/1 Bath \$421 2 Bedroom/2 Bath \$526 3 Bedrooms/2Bath \$578

Amenities:

Highly energy efficient units with Energy Star Range/Refrigerator/Dishwasher/ Central HVAC with Washer & Dryer Connection/Microwaves/Ceiling Fans/Picnic Area with Grills/ Clubhouse with Wireless Internet Service and Cable/Playground/Exercise Room/Gazebo/ Covered Bus Stop Shelter/Computer Center

Property Perks:

Be sure to participate in the community's Biannual Potluck Dinner, 3 different holiday festivities, Monthly News letters, Monthly Game Night, Monthly Movie Night

> Your rent includes: Trash, Lawn Care, Water, Sewer and Pest Control

You are responsible for connecting and paying:

Electricity, Phone, and Cable







Thank you for considering Timbers at Rayleigh your new HOME!

Application instructions:

• Please return your completed application to the property manager or you can also mail completed applications to:

Vantage Management c/o Timbers at Rayleigh P.O. Box 170 Fyffe, AL 35971

- All applications must include an application fee in the form of a <u>check</u> or a <u>money-order</u>. The fee is \$50 with an extra \$30 charged for each additional adult on the application. *The fee is non-returnable*.
- If you would like to expedite the application process, return your application in person and bring the following items:
 - State issued ID
 - Social Security Card
 - Proof of all earned and unearned income
 - Proof of all assets if assets
 - Proof of marital status
 - Birth certificates and social security card for dependants on application
- All applications must be filled out completely. Do not leave anything blank. If there is a blank line on the application that does not apply to you, please write "None" in the section in question.
- Incomplete applications will not be reviewed. A thoroughly completed application will speed up the procedure and make the process easier on you.
- The use of "white out" or "NA" will automatically cause the application to be rejected.
- The Tenant Consent and Release form is part of the application and **must** be signed and returned with the application and application fee.

A security deposit equal to your rent will be due at lease signing. You will not be able to move in without paying a security deposit.

All payments must be <u>check</u> or <u>money-order</u>. *No cash will be accepted*.

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Thanks again for your interest in our community! Help us make this your new home!

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IF ANY ERROR OCCURS OF	APPLICATI	ON FOR RES	E CORRECTION, INITIAL CORRECTION,	AND DATE IT.
New Prospect: Initial contact by: () Visit	NOTE: NO PETS ALLO	() Email	EMENT APPROVAL	
Applicant Name First	Middle	Last	Sex	
		Last	Sex	
• NEWSPAPER • D	RIVE-BY • A	PARTMENT GUIDE	RESIDENT OR FRI	END
YELLOW PAGES FI	LYER • C	RAIGSLIST	OTHER	
Why did you decide to move he	re?			
• When do you expect to mo	ve?			
How many people will be live	ving in the apartment?			
	Head of	Household		
()		()		
Home Phone #		Work Ph	none #	
			[] Own [] Rent	[] live w/relative
Present Address	City	State/Zip		
			()
Email Address			Second	/ dary Phone #
	onal			
Preferred method of communica	ation?()Phone ()E	Email () Mail	()Visit	
Date of Birth (Applicant)	SSN		State ID #	State
	Married	Divorced	□ Separated □ Widowed	
		n name or married nam	ne?∙YES • NO,	
Date of Birth (Co-Applican	t) SSN		State ID #	State
	Married 🛛 Single	Divorced	□ Separated □ Widowed	

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- Have you ever gone by another name, such as maiden name or married name? YES NO,
- If yes please fill in former name:

Do you anticipate a change in family size in the next 12 months? • YES • NO

If yes, please explain

Will you receive any rental assistance from an agency at time of move in or in the next 12 months? • YES • NO

HOUSEHOLD COMPOSITION (LIST ALL PERSONS WHO WILL OCCUPY APARTMENT. LIST DEPENDENTS WHO ARE CURRENTLY AWAY AT SCHOOL, BUT WHO PLAN TO LIVE IN THE APARTMENT)

NAME	SEX (M/F)	AGE	DOB	*FULL-TIME STUDENT (YES/NO)	RELATIONSHIP TO HEAD OF HOUSEHOLD	SOCIAL SECURITY NUMBER
					Self	

*NOTE: Households made up entirely of full-time students are not eligible to live in units receiving housing credits. A full-time student is defined as any individual, regardless of age, who has been or will be a full-time student during five calendar months during a calendar year at a regular educational organization. The student meets all of the educational organization's requirements for full-time student status to be considered a full-time student. There are five exceptions to the full-time student restriction:

Are any of the students listed above:	NAME				
a) Single parents and/or their children, who are not dependents of another individual?					
b) Receiving assistance under Title IV of the Social Security Act?					
c) Married to another household member and has filed a joint income tax return?					
d) Enrolled in a federal, state, or local job training program?					
e) Currently or previously been in the foster care system?					
Have any adults (18 and older) been, or will be, full-time students this calendar year? Yes No If yes, list the months you attended:					

Educational institution attended by those 18 & over:

Describe the program

Rental History

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Have you ever been evicted?					• YES	• NO
•						
Have you ever been sued for rent?					• YES	• NO
Have you ever been sued for property da	amages?				• YES	• NO
Have you ever broken a lease?					• YES	• NO
• Have you ever been convicted, plead gu	uilty, received proba	tions, deferred ad	judication, d	ourt-ordered	supervisio	n, or pre-trial
diversion for a felony, sex-related crime	or misdemeanor as	sault against anot	her person	?	• YES	• NO
Present Landlord/Property/Mortgage Co.	Address		City	State/Zip	Month	nly Rent/ Mortgage
	()			()	
Manager/Contact	Phone			Fax		
What is your reason for moving?						
How long have you lived at current reside	ence?					
If less than 2 years, please fill out below:						
Previous Address City	State/ Zip	Phone #		Мо	nthly Rent/ I	Mortgage
[] Owned [] Rented [] lived w/relative	•					
Previous Landlord/Property/Mortgage Co.	Address	City	St	ate/Zip	F	Phone #
What was your reason for moving?						

Income Information For all Household Members except Co-Applicant

•	Are you employed now, self-employed , a member of the Armed Forces , or currently receive unemployment ?	• YES	• NO
•	Do you currently receive VA benefits or any payment from the Social Security Administration?	• YES	• NO
•	Do any dependents of the household currently receive VA benefits or any payment from the Social Security Administration?	• YES	• NO
•	Are you receiving or do you expect to receive child support, back child support, alimony or back		
	alimony?	• YES	• NO
•	Do you have a court order that has awarded you child support, back child support, alimony, or back	• YES	• NO
	alimony?		
•	Are you receiving public assistance (TANF, AFDC)? This does not include food stamps.	• YES	• NO
•	Are you receiving income from a pension or retirement fund or from an annuity?	• YES	• NO
•	Are you receiving income from insurance policy payments or death benefits?	• YES	• NO
•	Do you receive workers compensation or receive payments from a severance package?	• YES	• NO
•	Are you receiving regular or periodic payments from anyone not already listed?	• YES	• NO

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Employment (Head of Household)

					()
Current Employer Name		Address	City	State/Zip	Phone #
Job Title	How long en	ploved?	F	stimated Yearly Income	
	()		()	
Supervisor Name	<u> </u>	Phone		Fax	
				()	
Current Employer Name		Address	City	State/Zip	Phone #
Job Title	How long en	ployed?	F	stimated Yearly Income	
			E.		
Supervisor Name	() Phone		Fax	
OTHER INCOME (Hea	ad of Househ	old): List all other	types of income for	or all household members, o	checked yes on the prior page.
NAME		TYPE OF INCO	ME/CONTACT	GROSS	MONTHLY AMOUNT

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Asset Information (Entire Household)

• Do you have any **checking**, **savings**, or **money market** accounts?

BANK ACCOUNTS: List all bank accounts for <u>all household members</u>, checked yes above.

EHOLD MEMBER NAME	/S&L/ CREDIT UNION	EET ADDRESS CITY/STATE	ACCOUNT #	JRRENT BALANCE	EST INCOME

OTHER ASSETS:

•	Do you have any cash on hand?	• YES	• NO
•	Do you own any treasury bills, stocks, bonds, or mutual funds (not in a retirement)?	• YES	• NO
•	Do you own any real estate or rental property?	• YES	• NO
•	Do you have an annuity , certificates of deposit (CDs), safe deposit box , or any personal property held strictly as investment assets (such as coins or art)?	• YES	• NO
•	Do you have a pension, 401k, 403b, IRA , or Keogh account?	• YES	• NO
•	Do you have a trust fund (access to the money)?	• YES	• NO
•	Do you have any whole or universal life insurance policies?	• YES	• NO
•	Have you disposed or given away any assets in the last 2 years?	• YES	• NO
• Lis	Do you have a Direct Express Card from Social Security or a Prepaid Debit Card from any source? It all other assets for <u>all household members</u> checked yes above	• YES	• NO

HOUSEHOLD MEMBER NAME	TYPE OF ASSET	CASH VALUE OF ASSET (LESS ANY MORTGAGE)	ANNUAL INCOME FROM ASSET

Emergency Contact:

1. In case of e	mergency, notify:		Phone		
Street Address			City	State	_Zip
Relationship					
2. In case of ser	rious illness or death, is the a	bove authorized to enter	apartment and remove of	ontents? • YES	• NO
VEHICLES:	Do you, or any family r	nember own a car?	• YES • NO		
MAKE	MODEL	YEAR	COLOR	TAG #	STATE
MAKE	MODEL	YEAR	COLOR	TAG #	STATE
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• YES • NO





Co-applicant(s)

()			()		
Η	lome Phone #			Work Phone #		
					[]Own []Rent	[] live w/relative
Pr	esent Address	City	State/Zip	How long have you lived here?		
					()	
En	nail Address				Seconda	ry Phone #
R	ental History					
•	Have you ever been evict	ed?			• YES	• NO
•	Have you ever been sued	I for rent?			• YES	• NO
•	Have you ever been sued	I for property dama	ges?		• YES	• NO
•	Have you ever broken a le	ease?			• YES	• NO
•	Have you ever been con	victed, plead guilty,	received probati	ons, deferred adjudication, court-o	ordered supervision	ı, or pre-trial
	diversion for a felony, sea	x-related crime or n	nisdemeanor ass	ault against another person?	• YES	• NO
In	come Information		pplicant only			
•	Are you employed now, unemployment ?	self-employed, a	member of the A	rmed Forces, or currently receive	• YE	S • NO
•		-		ne Social Security Administratio , back child support, alimony or		S • NO
	alimony?				• YE	S • NO
•	Do you have a court ord	ler that has awarde	ed you child sup	port, back child support, alimon	y, or back • YE	S • NO
	alimony?					
•	Are you receiving public	assistance (TANF	F, AFDC)? This d	oes not include food stamps.	• YE	S • NO
•	Are you receiving income	e from a pension o	r retirement fun	d or from an annuity ?	• YE	S • NO
•	Are you receiving income	e from insurance p	olicy payments o	r death benefits?	• YE	S • NO
•	-	-		s from a severance package ?	• YE	
•	Are you receiving regular	r or periodic payme	nts from anyone	not already listed?	• YE	S • NO







Employment (Co-Applicant)

			()
Current Employer Name	Address	City	State/Zip	Phone #
Job Title	How long employed?	F	stimated Yearly Income	
		L		
	()		()	
Supervisor Name	Phone		Fax	
			()	
Current Employer Name	Address	City	State/Zip	Phone #
Job Title	How long employed?	E	stimated Yearly Income	
	()		()	
Supervisor Name	Phone		Fax	

OTHER INCOME (Co-Applicant): List all other types of income for all household members, checked yes on the prior page.

NAME	TYPE OF INCOME/CONTACT	GROSS MONTHLY AMOUNT

LEASE PROVISIONS

A **non-refundable** fee of **\$50.00** is required to cover the cost of credit reports and other processing costs. If you feel that your APPLICATION FOR RESIDENCY has been unfairly denied, you have the right to contact Lowell R. Barron, II at Vantage Management, LLC. the Managing Agent, at (256) 417-4921 for further explanation. Not withstanding the preceding, however, you acquire no rights in any apartment until all of the following contingencies have been met: 1) your application is approved, 2) you pay the required deposit, and 3) you sign a Lease Agreement. At that time, this application would become part of the Lease.









ALL ADULT APPLICANT(S) MUST READ AND SIGN THIS STATEMENT TO ACKNOWLEDGE THEIR UNDERSTANDING

I/We certify that all of the information given above about me and my/our household is true, complete, and accurate. All persons or firms, including persons providing information concerning a criminal background check, may freely give any requested information concerning me/us, and I/we hereby waive all right of action for any consequences resulting from such information. I/We also understand that ALL CHANGES to the INCOME of ANY member of the household, as well as ANY CHANGES in HOUSEHOLD MEMBERS or STUDENT STATUS, must be reported to the Management in writing IMMEDIATELY. If any of the information is found to be incorrect, the landlord, at its sole discretion, may cancel or terminate the lease contract and retain all monies as liquidated damages. I/We also understand that should I/We be placed on a waiting list because no units are available, and I/We am/are later called to fill a vacant unit, I/We will be withdrawn from the waiting list should I/We decide not to lease the unit at that time. I/We will be required to fill out another application and pay another application fee should I/We decide to reapply with this complex.

APPLICANT	DATE	CO-APPLICANT	DATE
LEASING AGENT	DATE	CO-APPLICANT	DATE

It our policy to rent to qualified persons regardless of race, color, religion, sex, national origin, handicap, or familial status, and in compliance with all federal, state, and local laws.

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INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The Following information is requested by the Federal Government in order to monitor compliance with Federal laws prohibiting discrimination against applicants seeking to participate in the program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluation of your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national origin of individual applicants on the basis of visual observation or surname.

APPLICANT:	I do not wish to	furnish thi	s informatior	۱	(initials)
		lational Or	igin)		
		Hispanic o	or Latino		_ not Hispanic or Latino
	Asian Black	or African <i>i</i>	or Alaska Na American or Other Pac		
	SEX:	Male	Fe	emale	
CO-APPLICANT:	l do not wish to	furnish thi	s informatior	۱	(initials)
		lational Or	igin)		
	·	Hispanic o	or Latino		_ not Hispanic or Latino
	Asian Black	or African <i>i</i>	or Alaska Na American or Other Pac		
	SEX:	Vale	Fe	emale	
Applicant's Signatu	ire		Date		
Co-Applicant's Sigi 2017.1 13 Page	nature		Date		
E			NTAGE AGEMENT		EQUAL HOUSING OPPORTUNITY

TENANT RELEASE AND CONSENT

I/We ______, the undersigned hereby authorize all persons or companies in the categories listed below to release information regarding employment, income and/or assets for purposes of verifying information on my/our apartment rental application. I/We authorize release of information without liability to the owner/manager of the apartment community listed below and/or the State and Local Agencies/Department's service provider.

INFORMATION COVERED

I/We understand that previous or current information regarding me/us may be needed. Verifications and inquires that may be requested include, but are not limited to: personal identity, student status, credit and criminal history, employment, income and assets, medical or child care allowances. I/We understand that this authorization cannot be used to obtain information about me/us that is not pertinent to my eligibility for and continued participation as a Qualified Tenant.

GROUPS OR INDIVIDUALS THAT MAY BE ASKED

The groups or individuals that may be asked to release the above information include, but are not limited to:

Past and Present Employers Support and Alimony Providers State Unemployment Agencies	Welfare Agencies Educational Institutions Social Security Administration	Veterans Administrations Retirement Systems Medical and Child Care
Banks and other Financial Institutions	Previous Landlords (including Public Housing Agencies)	
Credit Reporting Agencies	Household Members	Criminal History Reporting Agencies

CONDITIONS

I/We agree that a photocopy of this authorization may be used for the purposes stated above. The original of this authorization is on file and **will stay in effect for a year and one month** from the date signed. I/We understand that I/We have a right to review this file and correct any information that is incorrect. **Everyone 18 years of age and older must sign this form.**

SIGNATURES

Signature of Applicant/Resident	Printed Applicant/Resident Name	Date
Signature of CO/Applicant Resident	Printed Co/Applicant/Resident Name	Date
Signature of Adult Member	Printed Adult Member Name	Date
Signature of Adult Member	Printed Adult Member Name	Date

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<u>«sitename»</u>

<u>«sitepropertymanager»</u>

«sitepropertydate»

Apartment Community Name

Contact

Phone

THIS GENERAL CONSENT MAY NOT BE USED TO REQUEST A COPY OF A TAX RETURN. IF A COPY OF A TAX RETURN IS NEEDED, IRS FORM 4506, "REQUEST FOR COPY OF A TAX FORM" MUST BE PREPARED AND SIGNED SEPARATELY.

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We Do Business in Accordance With the Federal Fair Housing Law

(The Fair Housing Amendments Act of 1988)



OPPORTUNITY

It is Illegal to Discriminate Against Any Person Because of Race, Color, Religion, Sex, Handicap, Familial Status, or National Origin

In the sale or rental of housing or residential lots	In advertising the sale or rental of housing
In the financing of housing	In the provision of real estate brokerage services
In the appraisal of housing	Blockbusting is also illegal
Anyone who feels he or she has been discriminated against may file a complaint of housing discrimination:	U.S. Department of Housing and Urban Development
1-800-669-9777 (Toll Free) 1-800-927-9275 (TTY)	Assistant Secretary for Fair Housing and Equal Opportunity
www.hud.gov/fairhousing	Washington, D.C. 20410

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Previous editions are obsolete I am aware of my rights to Fair Housing. form HUD-928.1 (8/2011)

Tenant Signature

Date

Tenant Signature

Date

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