



HERITAGE HILL APARTMENTS
201 Heritage Hill Trail
Anchorage, KY 40223
(502) 245-1600

Thank you for applying at Heritage Hill Apartments.

Your application will be processed using the following screening criteria:

- Fair Housing and Equal Opportunity requirements will be adhered to.
- Applicants must demonstrate the ability to pay rent on time and monthly gross income must be equal or greater than three times the rent amount.
- Valid picture I.D. must be submitted by all adult household members with this application. Submission of any invalid document or number will be reason for rejection of application.
- A credit report will be obtained and must show no delinquent balance due previous or present landlords and utility companies.
- A police report will be required prior to move-in. Applicants will be rejected if there is any history of drug related crimes, other violent felony crimes and numerous crimes committed in the past five years.
- Comments will be obtained from present and/or prior landlord(s) for the past three years.
- The application will be denied if the applicant is under the age of 18 and is without an adult co-signer.
- The family size is not appropriate for the size of units available.

Please fill out, sign and date your application. Please submit with your application the following information:

- **Copies of Photo I.D./ Drivers License for all adult household members that are 18 and older.**
- **Copy of most recent paycheck stub for all employed household members, or a bank statement proving you have an income.**
- **NON-REFUNDABLE APPLICATION FEE OF \$30.00 FOR EACH ADULT MEMBER- MONEY ORDER OR CHECK ACCEPTED ONLY.**

Falsifying any information on this application is grounds for automatic rejection. Applications are kept on file for 90 days after receipt after which time, we may require updated information. If you have any questions, please contact our office.





**UNDERHILL ASSOCIATES, INC.
APPLICATION FOR RESIDENCY**

Community Apartment: _____ Community Owner: _____
Apt. Type _____ Apt # _____ Address _____ Resident Move-in date _____
Base Rent \$ _____ Short-term Premium \$ _____ Security Deposit \$ _____ Prorate amt. \$ _____
Pet? Y N Type _____ Name _____ Size _____ No. _____ Non-refundable pet fee \$ _____
Monthly pet rent \$ _____ Garage # _____ Garage Monthly Fee \$ _____
Why did you choose our community to be your home? _____
How were you referred to us? _____

Non-refundable administrative fee \$ _____ THIS IS A NON-REFUNDABLE PAYMENT FOR A CREDIT CHECK AND PROCESSING CHARGE FOR THIS APPLICATION. SUCH SUM IS NOT A RENTAL PAYMENT OR SECURITY DEPOSIT. THIS AMOUNT WILL BE RETAINED BY COMMUNITY OWNER TO COVER THE COST OF PROCESSING APPLICATION AS FURNISHED BY THE APPLICANT.

PERSONAL INFORMATION

Applicant's full name _____ Date of Birth _____
Sex M F Marital Status _____ Phone _____ Cell Phone _____
Social Security no. _____ Driver's license no. _____ State _____
Co-applicant's full name _____ Date of Birth _____
Sex M F Marital Status _____ Phone _____ Cell Phone _____
Social Security no. _____ Driver's license no. _____ State _____
List name, date of birth and relationship of other persons occupying premises:
Name _____ Date of Birth _____ Relationship _____
Name _____ Date of Birth _____ Relationship _____
Name _____ Date of Birth _____ Relationship _____
Name _____ Date of Birth _____ Relationship _____
In case of emergency, notify (not living with you): Name _____
Address _____ city _____ state _____ phone _____ relationship _____

RESIDENCE HISTORY

Present address _____
Community name, landlord or mortgage holder _____ Phone _____
Monthly Pmt \$ _____ length of residence (yrs/months) _____ / _____ Lease expires _____
Reason for moving _____
Previous Address _____
Community name, landlord or mortgage holder _____ phone _____
Length of residence _____ / _____ reason for moving _____
Have you ever had an eviction filed against you? Y N Have you ever broken a rental agreement? Y N
If Y to either question, where? _____



EMPLOYMENT INFORMATION

Applicant's present employer _____ Address _____
 _____ Position _____ Since _____
 Work Phone _____ Contact _____ Gross monthly income \$ _____
 Applicant's previous employer _____ Address _____
 _____ Position _____ Dates employed _____
 Work Phone _____ Contact _____ Gross monthly income \$ _____
 Reason for leaving? _____

Co- Applicant's present employer _____ Address _____
 _____ Position _____ Since _____
 Work Phone _____ Contact _____ Gross monthly income \$ _____
 Applicant's previous employer _____ Address _____
 _____ Position _____ Dates employed _____
 Work Phone _____ Contact _____ Gross monthly income \$ _____
 Reason for leaving? _____
 Do you have any children living not with you that you pay child support for? Y or N, monthly amount \$ _____
 Do you pay maintenance or alimony to your former spouse? Y or N, if Y, monthly amount \$ _____

OTHER INFORMATION

Auto make/model _____ year _____ color _____ tag no. _____ State _____
 Auto make/model _____ year _____ color _____ tag no. _____ State _____
 Auto make/model _____ year _____ color _____ tag no. _____ State _____

Why are you renting:

- House under construction Economic decision New to city Prefer renting to owning
 Saving for down payment Temporary work assignment

E-MAIL address: _____

APPLICANT'S CONSENT

Have you (or any co-resident) ever been convicted of a crime? Y N
 If yes, explain _____

Authorization:

I hereby authorize the Sheriff's Department or other independent services or local law enforcement agencies to furnish the Community Owner with any information such agencies may have concerning me. I do hereby release the Community Owner, Sheriff's Department and other such agencies from al liability for any damage whatsoever incurred in furnishing, obtaining and using such information.

I further authorize the Community Owner to obtain a credit history and report concerning me, and hereby release the Community Owner and the credit-reporting agency from all liability for any damage whatsoever incurred in furnishing, obtaining and using such information.

Applicant and Co-Applicant each represent that all the above statements are true and hereby authorize verification of above information, references and credit records. Applicant and Co-Applicant each acknowledge that false information herein may constitute grounds for rejection of this application, terminating the right of occupancy, and forfeiture of deposits and may constitute a criminal offense under the laws of this State.

Keys will be furnished only after the contemplated lease and other rental documents have been accepted by all parties and only after applicable rentals and the security deposit and the non-refundable fees have been paid. The initial rent payment will be due and payable upon the signing of the lease and other rental documents and will cover the period from the first day of the term through the remainder of that month. Thereafter, all rental payments will be due ad payable in advance on the first day of each month.





TENANT RELEASE AND CONSENT

I/We _____, the undersigned hereby, authorize all persons or companies in the categories listed below to release without liability information regarding employment, income and/or assets to **HERITAGE HILL APARTMENTS** for purposes of verifying information on my/our apartment

INFORMATION COVERED

I/We understand that previous or current information regarding me/us may be needed. Verifications and inquiries that may be requested include, but are not limited to, personal identity; employment, income and assets; medical or child care allowances. I/We understand that this authorization cannot be used to obtain any information about me/us that is not pertinent to my/our 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 includes, but are not limited to:

- | | | |
|--|----------------------------------|--|
| Past and Present Employees | Welfare Agencies | Veterans Administration |
| Previous Landlords (including Public Housing Agencies) | State Unemployment Agencies | Retirement Systems |
| Support and Alimony Providers | Social Security Administration | Banks and Other Financial Institutions |
| | Medical and Child Care Providers | |

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 I/we have a right to review this file and correct any information that is incorrect.

SIGNATURES

_____	_____	_____
Applicant/Resident	Print Name	Date
_____	_____	_____
Coapplicant/Resident	Print Name	Date
_____	_____	_____
Adult Member	Print Name	Date
_____	_____	_____
Adult Member	Print Name	Date

NOTE: 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 TAX FORM," MUST BE PREPARED AND SIGNED SEPARATELY.