

M. Jaffe Investment Company

P.O. Box 410029

St. Louis, MO 63141

Phone (314) 367-5650 Fax (314) 367-5043

E-mail Mark.Jaffe@mjaffegroup.com or Tena.Norwood@mjaffegroup.com Jeff@Urban-Dwellers.com

Property _____ Monthly Rent _____

Name _____ E-mail Address _____ Phone Number _____

Social Security Number _____ Date of Birth _____ Drivers License Number _____

Marital Status(Optional) Married Separated Widowed Divorced Single How Long? _____

Spouse/Roommate Name _____ Phone Number _____

Social Security Number _____ Date of Birth _____ Drivers License Number _____

Present Address _____ How Long _____

Number Street City State Zip

Landlord or Mortgage Holder _____ Phone Number _____ Monthly Payment _____

Previous Address _____ How Long _____

Number Street City State Zip

Landlord or Mortgage Holder _____ Phone Number _____ Monthly Payment _____

Employed By _____ Address _____ Phone Number _____

Position _____ Supervisor _____ How Long _____ Gross Monthly Salary _____

Employed By _____ Address _____ Phone Number _____

Position _____ Supervisor _____ How Long _____ Gross Monthly Salary _____

Source of Other Income _____ Gross Monthly Amount _____

Character References (Name of nearest relative other than spouse)

1. Name Relationship Address Phone Number

2. Name Relationship Address Phone Number

Bank References

Bank Name _____ Checking Account Number _____

Address _____ Savings Account Number _____

Credit References	Address	Account Number	Monthly Payment	Present Balance

Automobile

Auto	Make	Year	License Number	Date Purchased	Monthly Payment	Balance	Financed By	Balance

If you are responsible for child support, alimony or maintenance payments indicate amount \$ _____

Monthly child care expense (baby sitter, nursery, pre-school, etc.) \$ _____

Have you ever been evicted or declared bankruptcy?(If so please explain) _____

Pets Yes _____ No _____ Pets are not permitted unless approved by authorized agent in writing.

The following occupants (and no others) are to occupy said apartment: Date Occupancy Is To Begin _____

(Birth Dates are requested in order to determine the potentiality of contractual liability)

Husband/Occupant _____ Birthdate _____ Wife/Occupant _____ Birthdate _____

Children/Occupant _____ Birthdate _____ Children/Occupant _____ Birthdate _____

Reason for moving? More Convenient To Work School Recreation Other Reason _____

How did you learn about this unit? Newspaper Sign Website Friend Other _____

This application is signed and dated by the applicant/applicants below:

Applicant _____ Date _____ Applicant _____ Date _____

In signing this application, the undersigned states that the above information is warranted to be true and hereby authorizes M. Jaffe Investment Company (hereinafter referred to as MJIC) to investigate the references here in used, or statements or other data obtained from me or from any other firm or person, pertaining to my employment background, source of income, credit history, residential history, financial responsibility or possible criminal history. The undersigned specifically authorizes MJIC to obtain my credit bureau report. The undersigned agrees that this application shall remain the property of MJIC. The undersigned further recognizes that MJIC in its investigative procedures does not consider any information obtained through its investigation to be confidential and a full disclosure of pertinent facts may be made to the landlord or other firms. I further agree to pay the cost of MJIC's report not to exceed \$30.00 which may or may not be deducted from the deposit.

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E-mail mark.jaffe@mjaffegroup.com or tena.norwood@mjaffegroup.com Website: mjaffegroup.com

VERIFICATION REQUEST

To Whom It May Concern:

Please be advised that the undersigned has authorized the disclosure of the following information:

Landlord Information

When did the account open? _____;close? _____
What was the monthly payment? _____
Did the resident(s) pay promptly? _____ If no, explain _____
Did the resident(s) give a thirty(30) day notice? _____
Were there any disturbances or property damage? _____
If yes, explain? _____
Is the undersigned past due? _____ Amount Past Due _____
Has the undersigned had any returned checks? _____ Number of Returned Items _____
Has the undersigned had any late charges? _____ Number of Late Charges _____
Number of times late 5 days _____ 30 days _____ 60 days _____ 90 days _____
Is there a co-resident signed on the lease? _____ Is the lease guaranteed by a co-signer? _____
Are the resident(s) currently receiving any housing subsidy? _____
Were there any unauthorized residents? _____
Would you re-rent to the resident(s)? _____ If no explain _____

Employment Verification

What date was the applicant hired? _____;if terminated, the date employment terminated _____;what position does the applicant hold _____
What is the applicants monthly, yearly, hourly wage? _____
Is the applicant full time or part time? _____ If part time, hours per week _____
Does the applicant have any garnishments? _____

Credit and Loan Information

What date was the account opened? _____ What is the high credit? _____
The number and amount of payments _____ The current balance _____
How many payments were late? _____ When is the applicant next due? _____

Bank Reference

The undersigned authorizes the release of any and all information related to their deposit relationship. If the undersigned has any additional deposit relationships, please provide the following information.

Account #	Date Open	Type	Average Balance	# of NSF or OD's

**We would appreciate your reply as soon as possible.
Thank you.**

Respectfully,

Property Manager

Authorized By:

→ _____ → _____
Applicant's Signature Date Spouse's Signature Date

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Memo

_____ (Name) is submitting a \$_____ (Amount 1/2 of One Month's Rent) non-refundable Reservation Deposit to M. Jaffe Investment Company for _____ (Address including Apartment #). This Reservation Deposit is for a lease to commence on _____ (Date) and terminate on _____ (Date). The Monthly rental payment shall be \$_____ (Amount) per month. A Security Deposit of equal to one month's rent shall be required prior to commencement of lease. This **non-refundable** Reservation Deposit shall be converted in a partial payment on the Security Deposit. This **non-refundable** Reservation Deposit shall be refunded only if applicant fails to meet credit requirements set by M. Jaffe Investment Company's independent credit verification contractor. This **non-refundable** Reservation Deposit is will be applied to liquidated damages should applicant fail to enter into a lease.

Application Requirements

Please submit W-2 or proof of Income (2 pay periods of pay stubs)

Move In Requirements (Before Signing Lease)

- 1) Proof of Renter's Insurance
- 2) Utilities turn on in Residents name
- 3) If there is a security alarm, resident responsible for calling Hackett Security to have it monitored (& monitoring fee)

Mark Jaffe-Vice President
M. Jaffe Investment Company

Date

Name

Date

Address

City/State/Zip

Home Phone

Office Phone