

APPLICATION + LEASE INFORMATION

APPLICATION

- To apply for a property, you must submit a completed application, a copy of your photo ID, verification of income and a **\$35 application processing fee per adult occupant**. The application fee may be paid by certified check, or money order. Please make a check or money order out to West Oaks Apartments or Lee Ray Bergman LLC.
- The application process includes a credit check provided by an off-site service. Completion of the credit check may take 3-4 business days. You'll be notified by a member of our staff of the outcome of your application in writing.
- Submit your application in person, via fax, or email:

704 Flavion Dr. Raleigh, NC 27608

westoaks@brrapartments.com

O:919-834-5640 F:

984-849-0165

LEASE

- I understand that if the lease has more than one tenant listed, all tenants are jointly responsible for the full rent payments and other terms of the lease
- I understand that the Security Deposit cannot be used as the last month's rent payment
- I understand that the Security Deposit is a damage reserve and is refundable pursuant NCGS 42-51
- I understand that the property must be left in good + clean condition
- I understand that in order to secure the property for myself I must sign a lease and pay a deposit or a non-refundable holding fee.
- I understand that the Security Deposit and initial rent payment must be in certified funds (money order or certified bank check)
- I understand that I am responsible for scheduling utilities to be put into my name prior to my move in date

Acceptable verification of income (2x the monthly rent required per unit as minimum income):

- Two most recent check stubs
- Direct Deposit from bank reflecting consecutive income deposits
- Offer Letter that can be 3rd party verified

Reasons your application may be denied:

- Criminal Convictions at management discretion – especially crimes threatening the well-being of another
- Credit concerns – regular or recurring late payments/credit score below 600
- Eviction
- Unpaid or recurrent late payments on utilities or rent
- Insufficient Income
- Failure to provide information, or fraudulent information
- Excessive tenant damage to a previous rental property

THIS LIST IS NOT ALL-INCLUSIVE, AND MANAGEMENT RESERVES THE RIGHT TO DENY ANY APPLICATION AT THEIR DISCRETION; Please feel free to discuss any concerns prior to submitting an application

West Oaks Apartments

705 Flavion Dr. Raleigh, NC 27608

westoaks@brrapartments.com

858 Square Feet, Two Bedrooms / One Full Bath

12 Month Lease for \$1230 per month

992 Square feet Three Bedroom/Two Baths 12 month

Lease for \$1420 per month

Smoke Free Campus

Not Pet Friendly

Security Deposit = one month's rent/Pay at Move In

Non-refundable Holding Fee = \$300 paid upon application approval

All monies must be paid in certified funds



This Section is For Office Use

Address of property to be rented: _____
Date received by landlord: _____ Application fee \$ _____
Accepted? Yes ___ No ___ If yes: 1st month rent: \$ _____ Deposit: \$ _____
If approved, Lease Sign Date: _____ Time: _____

Applicant Information

Full Name: _____ Date of birth: _____
Social Security Number* _____ - _____ - _____ Drive license number: _____
Your current telephone number(s): (____) _____ - _____ or (____) _____ - _____
Email: _____@_____.com

Current Address: _____ City: _____
State: _____ Zip: _____

How long have you lived at the current address? _____
Current rent amount: \$ _____ Reason for moving: _____
Name and phone number of your current landlord: _____

Previous address: _____
City: _____ State: _____ Zip: _____
Reason for moving? _____
Name and phone number of your previous landlord: _____
Lived here From: _____ To: _____

Work Information, If more space is needed please attach an additional page.

Employer: _____
How long have you worked at your current employment? _____
Name and phone number of your supervisor: _____
What's your position? _____
Income \$ _____ / Month Year
Any additional source of income? _____

Total Annual Income: _____

List all household members living in the unit.

Full Name:	Relation:	Age:	Social Security #

Vehicle Information.

Make/Model	Color	License Plate #

Please list 3 Emergency Contacts

Full Name	Relationship	Telephone #

List any Service Animal or Emotional Support Animal below. Please include required documentation when submitting an application.

Type (Dog/Cat/Etc)	Age	Weight	Breed	Spayed/Neutered?

Please answer the following questions and circle **YES** or **NO**.

Do you smoke? **Yes No**
____ (Initial) I understand that West Oaks Apartments is a smoke free campus and smoking is prohibited inside any of the units or surrounding areas. I understand I will be held liable for smoke damage remediation and or will be lease violated/terminated as a consequence.

U.S military or naval service?	Yes No	How many times? _____
If not, are you planning to join the U.S military?	Yes No	If Yes, When? _____
Are you a dependant of a servicemember in the U.S. military	Yes No	
Have you ever; filed for bankruptcy?	Yes No	How many times? _____
Been Evicted?	Yes No	How many times? _____
Sued someone else?	Yes No	How many times? _____
Have you ever been sued?	Yes No	How many times? _____
Been convicted of a crime?	Yes No	How many times? _____

Explain any "yes" answers listed above:

I acknowledge that the above statements are true and complete and further authorize verification of such statements including release of any police records if needed, now and for the duration of my tenancy. I verify that I am of legal age (18 years or older). I authorize West Oaks Apartments to conduct a criminal background check, a credit check including the acquisition of a credit report, a sex offender registry check, a check of landlord/tenant databases, a terrorist/wanted fugitive check, a current and previous landlord check, and a check of my references if requested. I further authorize West Oaks Apartments to share information contained in my application and background reports as well as any information regarding my tenancy with the agencies or persons listed above, including my Landlord.

APPLICANT'S SIGNATURE: _____ **Date:** _____

APPLICANT'S SIGNATURE: _____ **Date:** _____

APPLICANT'S SIGNATURE: _____ **Date:** _____

RESIDENT INCOME CERTIFICATION

The undersigned hereby certifies and agree as follows:

1. Income Certification: I have reported all sources of income to the owner and the total annual gross income from all sources falls within the required income limits based on household size at a 50% AMI. ***Please circle and initial your household size and income limit.***

1 person	2 person	3 person	4 person	5 person	6 person
\$51,420	\$58,740	\$66,060	\$73,380	\$79,260	\$85,140

2. False Statements: If my income certification and/or any lease application submitted by me is false, the landlord will have the right to terminate my lease and recover possession of my apartment.

OWNER CERTIFICATION

Based on the representation of the applicant/tenant income the household constitutes an eligible low-income unit under the provisions of Section 42 of the Internal Revenue Code, as amended.

3. The annual household income for the tenant household does not exceed the current tax credit income limit of \$ _____

Applicant Signature.

Property Manager Signature.

Print Name.

Print Name.