

# THE AXIS

ON 36TH STREET

Rental Rates as of: January 01, 2017

Floor Plans	Market Rent	Application Fee	Admin Fee	Security Deposit
Single Classic	\$1100.00	\$50.00	\$250.00	N/A
Single Plus	\$1200.00	\$50.00	\$250.00	N/A
Single Deluxe	\$1300.00	\$50.00	\$250.00	N/A
Single Suite	\$1500.00	\$50.00	\$250.00	N/A
Double Classic	\$800.00	\$50.00	\$250.00	N/A
Double Plus	\$850.00	\$50.00	\$250.00	N/A
Double Deluxe	\$900.00	\$50.00	\$250.00	N/A

**Application Procedures:** The following MUST accompany ALL applications:

- 1. Application Criteria form must be signed and fully understood by all applicants.**
- 2. Driver's License & Social Security #** (additional forms of ID may be applicable – see Application Criteria Form)
- 3. Proof of Income** (See next page Application Criteria – Income/Employment)
- 4. Application Fees:** Payments can be charged to Visa, MasterCard, Discover or money order/certified check:
  - **\*Application fee - \$50.00 - Payable to Axis UKA Associates, LP** \*Fees Are Non-Refundable
  - **\*Administrative fee per person - \$250.00 (due at application)** \*Fees Are Non-Refundable upon approval

*\*Administrative fees will be charged for performing one or more reference checks including, but not limited to, a Credit/Landlord Verification Report and/or a Criminal History Report. Additional surcharges may apply in certain states.*

Management reserves the right to deny any application that cannot be verified completely within 5 business days of application.

- 5. Renters' Insurance is strongly recommended**

**Move-In Costs for Approved Applicants:** (*due at move in*) Payable to Axis UKA Associates, LP

- First month's rent and / or pro-rate\*  
*\*if moving in after the 15<sup>th</sup> the following month rent must also be paid at move in*

**Lease Terms Available:**

- 6-12 Month Lease Term
- 4-5 Month Lease Term with \$25.00 monthly premium
- 3 Month Lease Term with \$50.00 monthly premium

**Pet Policy:**

- No pets accepted

20 S 36<sup>th</sup> Street Philadelphia PA 19104

(p) 215-662-0802 (f) 215-662-0804

## Application Criteria for Prospective Residents

**Equal Housing:** Altman Management Company conducts business in accordance with the Fair Housing Act. We do not discriminate on the basis of race, color, religion, national origin, sex, familial status, marital status, ancestry, sexual orientation, lawful sources of income, disability or handicap, or any other basis protected by applicable state or local fair housing laws.

**Applicants:** Each applicant that is 18 years of age or older must complete an application and if the application is approved, sign the lease as a leaseholder. Applications are to be completed in full; applications containing false, misleading, or incorrect information will be denied.

**Occupancy Limitations:** No more than two individuals per bedroom may occupy an apartment unit. One person per single room and two people per double room.

**Qualification Guidelines:** All Applicants must provide a valid driver's license, Military ID, passport or Government issued photo ID. Applicants must provide the following applicable documents:

- Proof of Social Security Number.
- Proof of legal alien status (Valid Permanent Resident Card or Visa) and federally issued ID number. Immigration status must be valid to meet or exceed the lease end date.

**Income/Employment:** Each Applicant must provide Proof of Income consisting of four (4) most recent pay stubs (two (2) if bi-weekly paid) or signed Letter of Intent from new employer on company letterhead, or other proof of income, all which may be checked and verified. If self-employed, submit last TWO personal tax returns or notarized statement from applicant's CPA. Full time students must submit a copy of enrollment verification to accredited school/college/university. Co-signers are accepted and must score 80 or above with no confirmed eviction filings AND must individually satisfy the income requirement of 4 times the rent. Properties may elect to accept Co-signers for applicants who's Decision Point score causes the applicant to be rejected and there are no confirmed eviction filings or criminal record. Cosigner must score 80 or above with no confirmed eviction filings AND must individually satisfy the income requirement of 4 times the rent.

**Background Check and Credit Authorization:** It is the Company's policy to perform one or more reference checks including, but not limited to, a Credit Report from a consumer credit reporting agency and, if warranted, a Criminal History report and/or a Landlord and Employment History report.

**Criminal History:** Have you ever been arrested or convicted of a crime: [  ] Yes [  ] No

Note: For a "Yes" answer, please provide additional information regarding EACH and EVERY incident, including the date, location and nature of the crime, on a separate sheet of paper. Any applicant either 1.) Having been charged in the past with a crime, or 2.) Charged with the commission of a crime during the screening process, whether the case is pending, or whether the final verdict has been rendered (guilty or not guilty) may be denied. As part of the application process, applicants will be required to sign this form, which authorizes investigation of, and releases such information. Refusal to sign this form or to cooperate fully with the Company's investigation will constitute ineligibility for housing. The company will make every effort to keep any information obtained from such investigators strictly confidential. The Company will implement this policy in a non-discriminatory manner. The Company reserves the right to change or modify this policy at any time for any reason.

**Your Application for rental may be denied based on the following:**

- False, misleading or incorrect information on application
- Poor rental or mortgage payment history
- Insufficient income
- Poor Credit
- Criminal Record

**Cancellation or Denied Applications: Application fee of \$50.00 is non-refundable.**

In the event the applicant withdraws their application, Administrative fee will be forfeited. If cancellation occurs after approval, any and all monies will be forfeited. If application is denied either individually or group, any and all applicants must wait a period of 30 days to reapply.

**By signing below, I verify that I have read & understand the criteria from which my application will be processed.**

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Leasing Consultant:** \_\_\_\_\_

**Date:** \_\_\_\_\_

# APPLICATION FOR RESIDENCY

DATE & TIME RECEIVED: \_\_\_\_\_

COMMUNITY #: 354

MOVE-IN DATE: \_\_\_\_\_ MOVE-OUT DATE: \_\_\_\_\_

COMMUNITY: The Axis on 36<sup>th</sup> Street

ADDRESS: 20 S 36<sup>th</sup> Street

Philadelphia, PA 19104

LEASE TERM: \_\_\_\_\_ MARKET RENT: \$ \_\_\_\_\_

PHONE: 215-662-0802

ROOM TYPE: SINGLE CLASSIC | SINGLE PLUS | SINGLE DELUXE

MGMT. AGENT: Axis UKA Associates, LP

SINGLE SUITE | DOUBLE CLASSIC | DOUBLE PLUS | DOUBLE DELUXE

## PERSONAL INFORMATION / HISTORY

APPLICANT [ ] CO-SIGNER [ ]

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ MIDDLE: \_\_\_\_\_

HOME PHONE #: \_\_\_\_\_ WORK # \_\_\_\_\_ EXT: \_\_\_\_\_ CELL #: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

SOCIAL SECURITY #: \_\_\_\_\_ US CITIZEN: [ ] Yes [ ] No IF NO - VISA #: \_\_\_\_\_

BIRTHDATE: \_\_\_\_\_ MARITAL STATUS \_\_\_\_\_ SEX: \_\_\_\_\_

PRESENT ADDRESS: \_\_\_\_\_ APT#: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

COUNTY: \_\_\_\_\_ LENGTH OF OCCUPANCY: \_\_\_\_\_

RESIDENCE IS: [ ] APARTMENT COMMUNITY [ ] PRIVATE RENTAL [ ] HOME OWNER [ ] LIVE WITH FAMILY

LANDLORD OR MORTGAGE HOLDER: \_\_\_\_\_ PHONE #: \_\_\_\_\_

PREVIOUS ADDRESS: \_\_\_\_\_ APT#: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ COUNTY: \_\_\_\_\_

HAVE YOU EVER BEEN FILED ON FOR EVICTION? \_\_\_\_\_ IF YES, WHEN? \_\_\_\_\_ WHERE? \_\_\_\_\_

Have you ever filed for Bankruptcy? YES  NO

[ ] Chapter 7 – Date Discharged: \_\_\_\_\_ [ ] Chapter 13 – Confirmation Hearing Date: \_\_\_\_\_

## EMPLOYMENT HISTORY

EMPLOYER: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

START DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_ LENGTH OF EMPLOYMENT: \_\_\_\_\_ JOB TITLE: \_\_\_\_\_ MONTHLY GROSS INCOME: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_ PHONE: \_\_\_\_\_ EXT#: \_\_\_\_\_

CHECK HERE IF STUDENT: \_\_\_\_\_ NAME OF SCHOOL/UNIVERSITY: \_\_\_\_\_

ADDITIONAL SOURCES OF INCOME: \_\_\_\_\_ MONTHLY AMOUNT: \_\_\_\_\_

## OTHER RESIDENTS

LIST BELOW ALL PERSONS WHO WILL BE LIVING IN THE APARTMENT WITH YOU

FULL NAME	SOCIAL SECURITY #	BIRTHDATE	SEX	RELATIONSHIP TO APPLICANT

## EMERGENCY CONTACT

Who should we contact in case of an emergency? (*Someone who will not be living with you*)

Name: \_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Relationship: \_\_\_\_\_

### APPLICANT STATEMENT

I, the undersigned applicant make application to rent on the date listed on the reverse side and declare that all the information and representation contained in and with this application is, to the best of my knowledge and belief, true and correct. I also understand that in the event of acceptance of this application, if I fail to take possession of the apartments after the application is approved; all holding fees made in connection with this application will be forfeited to the Owner as compensation for the processing of the application and the loss of rental for the unit. I consent to any and all inquiries made by the Owner or its Agent if necessary to obtain references and to verify the information in this Application for Residency and agree upon request to provide documentary evidence of income of all proposed occupants including federal income tax information. I authorize Owner or its Agent to order and review one or more consumer reports relating to me (including, but not limited to, credit history, rental history (including with other properties owned by property owners affiliated with Landlord), and criminal history). I further authorize Owner or its Agent to order, review or investigate consumer reports relating to me and to continue to obtain, review or investigate consumer reports relating to me both during the duration of any lease or agreement I may enter into as a result of this application and at any time thereafter, including for the purposes of collection of amounts I may owe under any lease or other agreement. I further authorize and direct all employers, financial institutions, banks, creditors, residential managers/landlords to release any and all information relating to me to Owner or its Agent. In addition, I understand and authorize Owner or its Agent to obtain and use consumer report information relating to me (including, but not limited to, a credit score) for the purpose of conducting research into statistical credit models and evaluating the performance of various scoring models and sources of consumer reporting information, including, but not limited to, criminal conviction and skip tracing/eviction databases. I understand that if this application is approved, all information provided herein will become a part of the lease.

**A NON-REFUNDABLE FEE OF \$50.00 (PER APPLICANT) IS DUE AT TIME OF APPLICATION**

Applicant Signature

Date

Received By:

Date

[ ] Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

\$ \_\_\_\_\_ total required non-refundable fee(s)

[ ] Approved with Conditions by: \_\_\_\_\_ Date: \_\_\_\_\_

\$ \_\_\_\_\_ total required deposit(s)

[ ] Declined by: \_\_\_\_\_ Date: \_\_\_\_\_

Reason: \_\_\_\_\_

# Credit Card Payment Authorization For



## Property Information: (Agent Complete)

Community Name: **The Axis Apartments**  
Account ID#: **# 354 Altman Management**  
Invoice or ID used to process:

## Leasing Agent Fill in appropriate lines:

Application Fee: \$ 50  
Administrative Fee: \$ 250  
Move-in Charges: \$ \_\_\_\_\_  
Other: \_\_\_\_\_ \$ \_\_\_\_\_

**Grand Total:** \$ 300

## Applicant Information: (Applicant Complete)

Applicant Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

## Credit/Debit Card Information: (Applicant Complete)



Card Type:  
Circle One

Cardholder Name: \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

### Billing Address: (if different then address listed above)

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

## Authorization: (Applicant Completes)

By signing this payment form I agree to the Application and Administrative Fees or any charges listed above only.  
I understand that I am responsible to pay for the transaction/s as detailed above.  
I understand that the Application Fee will be charged first and then upon approval or cancellation, the Administrative Fee will then be charged to my account.

I understand and agree that once charged, **these fees are not refundable.**

Authorizing Signature: \_\_\_\_\_

Date: \_\_\_\_\_

