

Expert Knowledge - Exceptional Service

| Dear Applicant, | Date: | (Keep this page for your records.) |
|-----------------|-------|------------------------------------|
| T T 1 | | ((|

Thank you for inquiring about our apartments.

Points to remember when completing our application:

- ➤ We will run a background check of credit and criminal, which includes a national sex offender search. In order to process your application; there is a \$20 Fee (per person over the age of 18)
 - o Application **WILL NOT** be processed without the background check fee.
 - Application <u>WILL NOT</u> be processed if credit is on "HOLD" or "FREEZE.
 - The fee is payable via check, money order, or cash in office
- > Applications WILL NOT be processed if they are missing the fee and/or any information.
 - Which location(s) are you applying for? Please list the properties or locations at the top of the application. A list for reference is included with this application
 - o If any of the information does not apply to you, please enter "N/A" (not applicable) in the appropriate box so we do not mistake it as **missed information**.
- > Sign and date all required areas (Please double check the application before submitting)
 Rejection of the application may occur due to a history/conviction exists of any of the following:

> 1. Sex offender;

3. Destruction of property;

5. Criminal activity;

2. Disturbances of neighbors;

4. Drug-related criminal activity;

6. Prior evictions or poor landlord reference(s)

- ➤ Please attach a copy of the <u>SOCIAL SECURITY CARDS</u> (for all people listed on the application) and <u>DRIVER's LICENSES</u> or <u>PHOTO ID</u> (for everyone over the age of 18).
- ➤ Please SUBMIT / RETURN all completed applications to:
 - o 110 EXECUTIVE DRIVE HIGHLAND, IL 62249
- You will receive a letter within <u>10 BUSINESS DAYS</u> regarding if you have been accepted or denied.
- > Our office **WILL NOT** verify the following by phone:
 - Estimated time until your application receives approval/denial
 - Your place on the waiting list
- > Please DO NOT call the office about the status (this slows down the application process).
- ➤ Once your application has been added to the waitlist, it is <u>VERY IMPORTANT</u> you contact our office immediately of ANY CHANGES in your address or phone number.

If you have any other questions about the application, please feel free to call the number listed below, Monday through Friday, 8:00 am to 5:00 pm. Hearing impaired individuals can contact us by calling (800) 526-0844 for relay service.

We look forward to helping you find your new home!

Sincerely,

Terra Properties Inc.





Terra Properties' Residential Portfolio

Multi-Family Complexes-Income Based Apartments

AVA AVA APTS – 302 S RUSSELL & 301 S. 5^{TH} ST. COULTERVILLE APTS. – 7^{TH} & CEDAR STS

GIRARD HERITAGE NORTH – 114 W MOUND

GIRARD HERITAGE WEST – (1), 213/ (2), 215 BRENDA LANE

HIGHLAND DAFFODIL – (1-8) 1330 DAFFODIL, (9-24) 1340 DAFFODIL LANE

HIGHLAND SOUTHWEST APTS – 701 & 705 13[™] ST

HIGHLAND TOWN & COUNTRY APTS – 1410 & 1510 30TH ST NEW BADEN COUNTRY PLACE I – 407-425 EAST POOS DRIVE

NEW BADEN COUNTRY PLACE II – 412-422 POOS DRIVE

PINCKNEYVILLE ORCHARD APTS. - 705 VIRGINIA CT.
ST JACOB WESTGLEN APTS – 215 JACOB STREET
TRENTON OAKLAND APTS – 116 N. OAK STREET

TROY SILVERCREEK APTS – 402, 408, 414, 420, 424 MEADOW DRIVE

VANDALIA VANDALIA HEIGHTS APTS –

1928, 1922, 1916, 1910, 1904 W. RANDOLPH, & 220 N. ADAMS

Restricted 62+, Handicap, Disabled only. (Must meet 1 of the 3 restrictions). Income Based

Apartments

CARLYLE WESTLAKE APTS – 2110 WEST LAKE DRIVE
HIGHLAND NORTHTOWN EAST – 85 SUPPIGER LANE
HIGHLAND PLAZA GARDEN APTS – 200 SUPPIGER LANE
HIGHLAND SENIOR PLAZA APTS – 2676 EAGLE WAY

OKAWVILLE SENIOR APTS – 302 & 304 N. MILL STREET

PATOKA PATOKA SENIOR APTS – NORTH OAK STREET TROY IDLEWOOD – 601 & 527 LOWER MARINE RD

VALMEYER VALMEYER SENIOR APTS –

100, 104, &112 EAST WOODLAND RIDGE

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What rental units and/or locations are you applying for? Please write on the top line.

| | lle, Last) | | , | on regarding Head of House Date of Birth | , | | |
|--|-------------------------|-------------|------------------------------------|---|----------------------------------|-----------------------|--|
| an riamo (r noi, mac | , | | | Sato of Sitti | For Office Use | e ONLY: | |
| treet Address | | | | Social Security # | Social Security # | | |
| Nia. , | Т | Ctoto | Zin Code | Driver's License # | Date Received | l: | |
| City | | State | Zip Code | Driver's License # | | | |
| lome Phone # | | Cell Phone | - I | State Issuing License | Time Received | Time Received: | |
| Applicant's E-mail Add | dress | | | | Amount Paid:_ | | |
| Condor (ontional) | | Llianania/L | atino (optional) | Marital Status (antional) | Fanalassa laiti | ala. | |
| Gender (optional) Male or Fema | ale | | s or No | | | Employee Initials: | |
| Race (optional) | Black or | | Asian | American Indian or Alaskan | Native Hawaiian or Other Pacific | Other | |
| White | Amer | ican | | Native | Islander | | |
| ull Name (First, Mido | lle, Last) | | skip to next section | , | Date of Birth | | |
| Street Address (if diffe | erent from ap | pplicant) | | | Social Security | <i>,</i> # | |
| City State | | | Zip Code | Driver's License # | State Issuing L | State Issuing License | |
| Applicant's E-mail Add | dress | | | Home Phone # | Cell Phone # | | |
| Gender (optional) Male or | Female | | Hispanic/Latino (| optional) es or No | Marital Status (optiona | | |
| Race (optional) | Black or | African | A = 1: | American Indian | Native Hawaiian | Out | |
| White | Amer | | Asian | or Alaskan Native | or Other Pacific Islander | Other | |
| hildren and/or Δ | dditional | Occupan | 's Information | Complete only for children | who will occupy unit) | | |
| Child's Full Name (Fir | | | Date of Birth | Social Security # | Gender (<i>M/F</i>) | Race | |
| Child's Full Name (Fir | st, Middle, La | ast) | Date of Birth | Social Security # | Gender (<i>M/F</i>) | Race | |
| Child's Full Name (Fir | st, Middle, La | ast) | Date of Birth | Social Security # | Gender (<i>M/F</i>) | Race | |
| Child's Full Name (Fir | st, Middle, La | ast) | Date of Birth | Social Security # | Gender (<i>M/F</i>) | Race | |
| | a change | e in vour h | ousehold comr | oosition within the nex | | No | |
| o vou anticinate | | , | - | | | | |
| o you anticipate /ill any of the ab | • | ehold mei | nbers live anyw | there except in the apa | artification res | No | |
| /ill any of the ab | ove house | | • | nere except in the apa ess than full-time basi | | No No | |
| ill any of the ab | ove house ersons liv | ve in the a | partment on a l | • | is? Yes | No | |
| fill any of the ab | ove house ersons liv | ve in the a | partment on a l me/part-time st | ess than full-time basi udent at an institute of | is? Yes | No | |

Background Information

Elderly/Handicapped/Disabled Verification (Please realize that your eligibility for restricted properties must be verified; if this does not apply please skip write N/A and skip to next section.)

Are you or the co-applicant applying for status as an "elderly Household", where the resident or co-resident is 62 or

older, handicapped, or disabled as defined by Rural Development?

| | | YesNo | | | | |
|---|--|---|---|----------------------------|----------|------|
| Do you require any | special accommoda | | ns to the living unit bas | sed on a disability? | | |
| | | YesNo | D | | | |
| Explain: | | | | | | _ |
| 1973, and regulatio financial or adminis | ns implemented the | reunder at the barro | der Fair Housing Act, s wer's expense unless ation Request should | to do so would caus | e an und | lue |
| Maria a di ancada da | | -'I- "N" "NI-" | | | | |
| s the credit of appli | | ts currently on "HOLI | D" or "FREEZE"? ' or "FREEZE" has been | removed. | ⁄es | No |
| - | | d from Terra Propert | | | res | No |
| f, "Yes", Where?: _ | mambar ayar baan | evicted from any res | When?: | <u> </u> | 100 | |
| | | · · | | | res | No |
| | t- · · · · · · · · · · · · · · | | erty managed by Terr | | ⁄es | No |
| as any household | member been arres | sted? | | | res | No |
| r, "Yes , wno: | Explain: member been conv | victed? | | · . | | |
| | Explain: | | | , | res | No |
| Does anyone in the | household currently | y have any charges/o | convictions pending a | | | |
| f, "Yes", who: | Explain: | | federal sex offender | | res | No |
| | | er listed on a state or ates have they lived | | | ⁄es | No |
| | | | bsidized housing prog | uram for drug | | |
| elated or criminal a | activity? | | 0. | | Yes | No |
| | · | | | · | | |
| animals will be po | wed at <u>any</u> Rural D ermitted with autho | orization from a hea | rty (income based p alth care professiona \$300 refundable pet | al. | | |
| · | | | s? (Circle the answe | | | - |
| Word of mouth | Newspaper | Brochure/Other Paper Advertisement | Internet/Facebook /Social Media | 1800rentnow.net Website | 0 | ther |

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Landlord/Mortgage Lender Release

(Last 5 years of residency history; **SIGN & DATE** at the bottom.)

| | Applicant's Name | Date of Birth |
|---|--|---------------|
| | | |
| | Co-Applicant's Name | Date of Birth |
| | | |
| | Additional Occupant over the age of 18 | Date of Birth |
| | | |
| ı | Additional Occupant over the age of 18 | Date of Birth |

To whom it may concern:

Our tenant selection policy obliges us to verify the residential history of all household members applying for occupancy at our rental locations. To comply with this requirement, we ask for your cooperation in supplying information on the prospective residents' residential history. This information will be used only in determining whether the family can be accepted for occupancy.

Your prompt return of this information is appreciated. For your convenience we accept phone conversations, e-mails, faxes, and/or U.S Postal service returns of the forms requested.

Should you have any questions, Please feel free to call 1-800-736-8669, or e-mail at mail@terra-properties.com.

Sincerely,

Terra Properties Inc.

Applicants <u>DO NOT forward this form to your landlord(s)</u> it must be returned, signed, with your application for the application to be processed.

The undersigned understands that the information released pursuant to the authority herein granted shall be for the confidential use of Terra Properties, its successors and/or assigns. This information may be used for purposes of evaluation any tenant application submitted by the undersigned. A photocopy of this authorization may be deemed to be equivalent of the original and may be used as a duplicate original.

I have read this information on the purposes and use of information that is verified and consent to the release of information for these purposes and uses.

| Applicant's Signature: | Date: | | |
|--|-------|--|--|
| Co-Applicant's Signature: | Date: | | |
| Additional Occupant Signature:(over the age of 18) | Date: | | |
| Additional Occupant Signature:(over the age of 18) | Date: | | |



110 Executive Drive Highland, IL 62249
PH: 1-800-736-8669 FX: 1-618-654-1480
mail@terra-properties.com
www.1800rentnow.net

Terra Properties Inc. is an equal opportunity provider.



Personal Information

(If any of the below does not apply to you mark N/A)

| Applicant Residential Histo | ı y (Last 5 years | or residency histor | y; If you OWN fill o For How long? | Mortgage Lende | I skip to the next sec er? |
|--|--------------------------------|-----------------------|---|------------------------|--------------------------------------|
| Currently do you Rent or do | you Own ? (circle | which applies to you) | | | |
| Current Landlord | | Landlord' | s# | Comments: | |
| Current Landlord's Address (include | City, State, and Zip Cod | le) | | | |
| Are you related to the landlore | d? | Yes | No | | |
| Previous Landlord | | Landlord' | s # | _ | |
| Previous Landlord's Address (include | e City, State, and Zip Co | ode) | | | |
| Are you related to the landlor | d? | Yes | No | | |
| Co-Applicant Residential Hi | i story (Last 5 years | of residency history | y.) | | |
| Currently do you Rent or do | | | For How long? | Mortgage Lende | r? |
| Current Landlord | | Landlord's | s # | <u>Comments</u> | |
| Current Landlord's Address (include | City, State, and Zip Code | (e) | | | |
| Are you related to the landlord? | | | No | | |
| Previous Landlord | | | # | | |
| Previous Landlord's Address (<i>include</i> | e City, State, and Zip Cod | de) | | | |
| Are you related to the landlore | d? | Yes | s No | | |
| - | | NAMA (CT /s | (la a la company) | | |
| Emergency Contact (Name of Contact | Emergency Contact <u>C</u> | | elationship | Daytime # | арріісайон.) |
| Contact's Address (include City, Stat | te, and Zip Code) | | | Evening # | |
| Household Income Informate | tion | | | | |
| (If any of the below does not app | ly to you mark <u>N/A</u> ; yo | | | | |
| Applicant's Employment Income | SSI/SSD Amount (monthly) | Pension (monthly) | Child Support (monthly) | Other (monthly) | Total Gross monthly Income: |
| Wage: | | | | | |
| # of Hours Weekly: Co-Applicant's Employment Income | SSI/SSD Amount | Pension (monthly) | Child Support | Other (monthly) | Total Gross |
| | (monthly) | i chaon (monuny) | (monthly) | Carer (monthly) | monthly Income: |
| Vage: # of Hours Weekly: | | | | | |
| Applicant Income Source In | formation (If ve | ou are on SSI/SSD | please note that in | the first line, and me | ove onto the next sect |
| Employer's/Company's Name/ Source | ce of Income | 00,000 | Supervisor's Name | | Supervisor # |
| Employers Address (include City, Sta | ate, and Zip Code) | | Employment Position | Length o | of Employment |
| Co-Applicant Income Sourc | | ou are on SSI/SSD | | | |
| Employer's/Company's Name/ Source | ce of Income | | Supervisor's Name | Work / S | Supervisor # |
| Employers Address (include City, Sta | ate, and Zip Code) | | Employment Position | Length o | of Employment |

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Signatures: (all household member's over the age of 18)

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I/We authorize the owner/management to verify all information provided on this application and my/our signature(s) is our consent to obtain such verification. I/We certify that all information and answers to the above questions are true and complete to the best of my knowledge. I consent to the release of the necessary information to determine eligibility.

I/We authorize any person, or credit checking agency having any information on me/us to release any and all such information to the owner/management or their agents or credit checking agents. I understand that the credit report (rental history, arrest and/or conviction records, and retail credit history) will be done through a credit bureau contracted with the apartment community. I understand that a check will be made of the sex offender registry in states in which I have resided.

WARNING: "Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States government. HUD, the PHA and any owner (or any employee of HUD, the PHA or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on the verification forms is restricted to the purposes cited thereon. Any person who knowingly or willfully requests, obtains or discloses any information under false pretenses concerning an applicant or participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for dangers, and seek other relief, as may be appropriate, against the officer or employee of HUD, the PHA or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 42 U.S.C. 208(f), (f) and (h). Violation of these provisions are cited as violations of 42 U.S.C. 408 f, g, and h."

All contents of this application and information received from other sources will remain confidential.

PLEASE READ THE STATEMENT BELOW CAREFULLY BEFORE SIGNING THIS COMPLETE APPLICATION:

BACKGROUND CHECK – I/we understand that a background, including both criminal and credit, check will be conducted.

SIGNATURES (ALL household member's over the age of 18)

| Applicant's Signature: | Date: |
|--------------------------------|-------|
| Co-Applicant's Signature: | Date: |
| Additional Occupant Signature: | Date: |
| Additional Occupant Signature: | Date: |

The information regarding race, ethnicity, and sex designation solicited on this application is requested in order to assure the Federal Government, acting through the Rural Housing Service that the Federal laws prohibiting discrimination against tenant applications on the basis of race, color, national origin, religion, sex, familial status, age, and disability are complied with. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, the owner is required to note the race, ethnicity, and sex of individual applications on the basis of visual observation or surname.

Head of Household (census information, **circle** all that applies to you)

| Race | White/ Caucasian | Black/ African American | American Native/Alaskan Native | Native Hawaiian/ Pacific Islander | Asian | Other |
|----------------|---------------------|----------------------------|--------------------------------------|---|-------|-------|
| Ethnicity | Hispanic or Latino | | | Not Hispanic or Latino | | |
| Marital Status | Married | | | Single | | |
| Gender | Male | | | Female | | |



110 Executive Drive Highland, IL 62249
PH: 1-800-736-8669 FX: 1-618-654-1480

mail@terra-properties.com

www.1800rentnow.net

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