

Rental Qualifications

To qualify for the unit, all of the following items are considered on a weighted basis.

- **Credit Scores**
 - 625 to 825 Credit Score - Pass
 - 550 to 624 Credit Score - Conditional
 - Under 550 Credit Score – Not Considered
- **Past Residential Verification**
 - Applicant must have 2 years of satisfactory rental history
 - Applicant may not have an open eviction in the last 5 years or an unpaid rental collection within 5 years.
- **Employment / Income**
 - Applicant must have 2 years of positive employment history
 - Applicant must provide employer phone number, fax number, email address and physical address
 - Applicant must also provide a physical copy of their last two paycheck stubs.
 - Monthly Gross income of all applicants must be 3.5 times the rent
 - Self Employed Applicants must provide the last two years of Schedule C's from their personal Federal Form 1040 Income Tax Return, or Federal Corporate/Business Tax Return along with all income 1099's
- **Occupants**
 - The number of occupants that will reside in the unit is governed by local, state, and federal guidelines.
- **Additional Criteria**
 - This property does not allow pets unless it is a documented service animal.

Once you are prequalified through our credit and income analysis, we will perform a criminal background check. Disqualifying information is below:

- **Criminal History**
 - Any Felony or Misdemeanor relating to or regarding a person, property or drug related criminal activity in the past 3 years for the date of the investigative report to the date of the conviction including robbery, burglary, theft of any kind, weapons violation, assault of any kind, murder, sexual assault, embezzlement, fraud of any kind, selling or distribution or manufacturing of drugs, trespassing, stolen identity or any other crime they may be demonstrative of harm to a person or property.
 - Each Crime will warrant an individualized assessment and analyze the appropriate risk based on information received by the applicant to include any rehabilitation or information relevant to the risk.

However, no individualized assessment will be performed if the applicant has a criminal history that includes the following:

1. A current sex offender registration requirement pursuant to the Sex Offender Registration Act (or similar law in another jurisdiction) and/or;
2. A current child sex offender residency restriction.

Crime Free Community

This property participates in the Crime Free Community and requires a signature on the Crime Free Addendum at the time of lease signing indicating that the applicant will live a crime free lifestyle while a resident.

I have received the property criteria and have read the information contained above.

Applicant Signature _____

Date _____

Printed Name _____

Disclosure Notice of Cook County Human Rights Ordinance

I understand that pursuant to the Cook County Human Rights Ordinance, that I have rights afforded to me concerning criminal background screening. A Landlord may only look at the past 3 years of criminal conviction history from the date of the application.

I have a right to know all the criteria up front including credit, criminal, past residential history, employment history, crime free lease addendums, security deposits, pets, smoking, and any other qualifying criteria.

I also have the right to receive my own copy of the background report and understand the law that says:

“After the Landlord obtains the criminal background check results and provides a copy of the same to the Applicant within five calendar days the Applicant shall have five (5) business days to produce evidence that disputes the accuracy or relevance of information related to any criminal convictions from the last three (3) years. “

I also have the right to file a complaint to the Human Rights Commission at:

human.rights@cookcountyil.gov
69 W. Washington Street
Suite 3040
Chicago, IL 60602
312-603-1100

<https://www.cookcountyil.gov/service/human-rights-ordinances-and-regulations>

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Applicant Signature _____

Date _____

Printed Name _____

CRS MANAGEMENT INC. - APPLICATION FOR RENTAL

P.O. Box 2020 – LaGrange, Illinois 60525
(Phone) 708-246-5665 (Fax) 708-246-5696

PERSONAL INFORMATION (answer <u>all</u> questions, even if N/A)			
NAME			
ADDRESS			
CITY/STATE/ZIP			
CONTACT PHONE		WORK PHONE	
BIRTH DATE		SOCIAL SECURITY #	
DRIV LICENSE/STATE ID #			
YOUR EMAIL ADDRESS			
WHY ARE YOU MOVING?		DATE NEEDED	
CURRENT LANDLORD		PHONE NUMBER	
LANDLORD E-MAIL ADDRESS			
EMPLOYMENT INFORMATION			
EMPLOYER		HOW LONG HAVE YOU WORKED HERE?	
ADDRESS		SUPERVISOR NAME	
CITY/STATE/ZIP		SUPERVISOR PHONE	
POSITION		WORK FAX NUMBER	
GROSS PAY PER MONTH		SUPERVISOR EMAIL	
OTHER INCOME OR BENEFITS	\$	FROM	
PETS			
DO YOU HAVE ANY PETS? (CHECK YOUR ANSWER PLEASE)		NO	YES
IF YES, HOW MANY?	BREED/WEIGHT		
APPLICANT CERTIFICATION			
<p>I Hereby certify that under the penalties of perjury, all information contained herein is true, complete and correct. I agree that Landlord and/or its agent may verify any and all the information contained herein, and check references and run credit reports as applicable. I fully understand that any monies paid for credit processing are non-refundable. I fully understand that this application is preliminary only and does not oblige Landlord and/or its Agent to execute a lease or deliver possession of the proposed premises. I fully understand that Landlord and/or its Agent may terminate any agreement entered into upon reliance of any misstatement contained herein.</p>			
SIGNATURE		DATE	

EACH APPLICANT MUST BRING OR FAX THESE ITEMS TO PROCESS THE APPLICATION - LAST TWO PAYCHECK STUBS, LAST YEAR'S W-2 FORMS, CURRENT DRIVER'S LICENSE OR STATE ID, AND SOCIAL SECURITY CARD. IF YOU ARE SELF-EMPLOYED, INCLUDE FIRST TWO PAGES OF LAST 2 YEARS TAX RETURNS, SCHEDULE C, AND ALL 1099 FORMS.

VEHICLE INFORMATION

MAKE & MODEL		COLOR	
REGISTERED OWNER		LICENSE PLATE # AND STATE	
MAKE & MODEL		COLOR	
REGISTERED OWNER		LICENSE PLATE # AND STATE	

OTHER OCCUPANTS - ALL WILL BE LISTED ON THE LEASE (IF APPROVED) AS OCCUPANTS

NAME		AGE	
NAME		AGE	
NAME		AGE	
NAME		AGE	
NAME		AGE	

OTHER INFORMATION**(CHECK YOUR ANSWER PLEASE)**

HAVE YOU EVER BEEN NAMED AS A DEFENDANT IN AN EVICTION ACTION OR EVICTION ORDER?	NO	YES
IF YES, WHEN/DETAILS		
HAVE YOU EVER FILED BANKRUPTCY?	NO	YES
IF YES, WHEN/DETAILS		
HAVE YOU EVER BEEN THROUGH A FORECLOSURE?	NO	YES
IF YES, WHEN/DETAILS		
HAVE YOU EVER BEEN SUED FOR DAMAGE TO RENTAL PROPERTY?	NO	YES
IF YES, WHEN/DETAILS		

EMERGENCY CONTACT INFORMATION

PROVIDE THE NAME OF AN EMERGENCY CONTACT WHO WILL NOT BE LIVING WITH YOU			
NAME			
ADDRESS			
CITY/STATE/ZIP			
HOME PHONE		CELL PHONE	
WORK PHONE		RELATIONSHIP TO YOU	



REQUEST FOR EMPLOYMENT VERIFICATION

TO:	(HR, SUPERVISOR)
DATE:	
FAX NUMBER:	
PHONE NUMBER:	

The person named below has applied for a rental unit with us and provided the following employment history to us. You were listed as currently (or formerly) employing this person. This applicant, by his/her signature, has authorized you to release and verify this employment information. Your assistance in providing this information as quickly as possible would be sincerely appreciated. Thank you.

Employee Name	
Social Security # (last 4 digits)	***_**_
Department/Position	
Length of Employment	
<p>I Hereby certify that under the penalties of perjury, all information contained herein is true, complete and correct. I agree that Landlord and/or its agent may verify any and all the information contained herein and check references and run credit reports as applicable. I fully understand that any monies paid for a processing fee are non-refundable. I fully understand that this application is preliminary only and does not oblige Landlord and/or its Agent to execute a lease or deliver possession of the proposed premises. I fully understand that Landlord and/or its Agent may terminate any agreement entered into upon reliance of any misstatement contained herein.</p>	
SIGNATURE	DATE

<<< **APPLICANT – DO NOT FILL OUT ANYTHING MORE ON THIS PAGE** >>>

EMPLOYER VERIFICATION	
Dates of Employment	(FROM) _____ (TO) _____
Position Held	_____
Gross Salary or Wage	\$_____ per <input type="checkbox"/> Month <input type="checkbox"/> Week <input type="checkbox"/> Hour
	Average Hours Worked Per Week _____
Continued employment looks	<input type="checkbox"/> Poor <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Are you Related to this employee?	_____
SIGNATURE: _____	DATE: _____
PRINTED NAME: _____	TITLE: _____

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PHONE NUMBER:	

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Employee Name	
Social Security # (last 4 digits)	***_**_
Department/Position	
Length of Employment	
I Hereby certify that under the penalties of perjury, all information contained herein is true, complete and correct. I agree that Landlord and/or its agent may verify any and all the information contained herein and check references and run credit reports as applicable. I fully understand that any monies paid for a processing fee are non-refundable. I fully understand that this application is preliminary only and does not oblige Landlord and/or its Agent to execute a lease or deliver possession of the proposed premises. I fully understand that Landlord and/or its Agent may terminate any agreement entered into upon reliance of any misstatement contained herein.	
SIGNATURE	DATE

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	Average Hours Worked Per Week _____
Continued employment looks	<input type="checkbox"/> Poor <input type="checkbox"/> Fair <input type="checkbox"/> Good <input type="checkbox"/> Excellent
Are you Related to this employee? _____	
SIGNATURE: _____	DATE: _____
PRINTED NAME: _____	TITLE: _____

CRS MANAGEMENT INC.

P.O.BOX 2020 - LAGRANGE IL 60525
OFFICE: 708/246-5665 - FAX: 708/246-5696

REQUEST FOR RESIDENCY VERIFICATION

TO:	(CURRENT LANDLORD YOU PAY RENT TO)
DATE:	
FAX NUMBER:	
PHONE NUMBER:	

The person named below has submitted an application for a rental unit with our firm. This signed release from the applicant(s) authorizes our firm to check this information. Your prompt attention to this request is greatly appreciated – Thank you.

Applicant Name:	
Address:	
I Hereby certify that under the penalties of perjury, all information contained herein is true, complete and correct. I agree that Landlord and/or its agent may verify any and all the information contained herein and check references and run credit reports as applicable. I fully understand that any monies paid for a processing fee are non-refundable. I fully understand that this application is preliminary only and does not oblige Landlord and/or its Agent to execute a lease or deliver possession of the proposed premises. I fully understand that Landlord and/or its Agent may terminate any agreement entered into upon reliance of any misstatement contained herein.	
SIGNATURE	DATE

<<<APPLICANT – DO NOT FILL OUT ANYTHING MORE ON THIS PAGE>>>

Length of Residency:	_____	On Lease Individually?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Current Apartment Size:	_____	Current Monthly Rent	\$ _____
Are Any Utilities Included?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Current Balance Due	\$ _____
Current # of Occupants:	_____	Any Pets?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does Resident Have a Lease?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Has (was) proper notice been given?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Does/Did Resident pay rent on time?	<input type="checkbox"/> Yes <input type="checkbox"/> No	# Of Late Payments over rental period	_____
Are you related to this resident?	<input type="checkbox"/> Yes <input type="checkbox"/> No	# Of NSF Checks over rental period	_____
Has Resident Ever Been Taken to Court for Non-Payment of Rent?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date: _____ Outcome: _____	
Lease Violations?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date: _____ Outcome: _____	
Were there any problems with this resident? (If yes, please explain):	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Would you rent to this resident again?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Information provided by:
Signature: _____ Date: _____

Printed Name/Position: _____

**RENTAL POLICY
AUTHORIZATION AND RELEASE**

ALL PERSONS are welcome to complete an application.

- Applicant has submitted the sum of \$_____ which is a **non-refundable** payment for a processing fee required to evaluate this Application for Rental by the landlord/property manager.
- Applicant hereby certifies that the information given to evaluate the application for tenancy is correct and complete. Applicant further understands that any false or incomplete information is grounds for immediate rejection of this Application for Rental
- Applicant specifically authorizes and requests all present and previous employers, mortgage holders, landlords, rental agents, credit grantors, banks, accountants, stockbrokers, and local, state and Federal government Agencies to release any and all requested information in the evaluation of this Application for Rental. Applicant authorizes landlord/property manager to make any and all inquiries that landlord/property manager feel necessary to evaluate this Application for Rental.
- Applications are processed as they are received by our staff - meaning once **ALL** documentation and processing fees are collected from the applicant for a specific unit, the application process will begin.
- **This is an APPLICATION only and you are NOT GUARANTEED APPROVAL.**
- **IF** your Application is approved, you will have TWO (2) DAYS to meet with Agent to pay all amounts due, sign the lease and get your keys. **IF** you are unable to do that, we will go on to process the next Application. **WE DO NOT HOLD APARTMENTS FOR ANYONE FOR ANY REASON.** Applications are kept active for two weeks.
- Applicant represents that he/she has no infestation/pest issues where they are currently living or working. Should an issue with infestation/ pest issues arise once Applicant moves in, Applicant fully understands and acknowledges that extermination and/or damages suffered by Landlord or other residents of the property are the sole responsibility of the Applicant/Tenant. Additionally, misrepresentation to Landlord shall be grounds to terminate the lease.
- Should the Application for Rental be approved by landlord/property manager, then this Authorization and Release shall extend through any and all rental periods.

SIGNATURE	
PRINTED NAME	
DATE	

CRS Management Inc.

P.O. Box 2020
LaGrange, Illinois 60525
Phone: (708) 246-5665
Fax: (708) 246-5696

Thank you for submitting your Application for Rental.

You will receive an email shortly from **MyRental.Com/Equifax** that you will need to respond to immediately upon receipt. In order for the process to be completed, you will need to VERIFY and AGREE, using your email address, to have your credit report provided to us.

CHECK YOUR SPAM AND JUNK FOLDER – and make sure to reply immediately.

We will be in touch with you once all of your paperwork has been processed.

Please scan the following items that were not provided and E-MAIL them to **(crsmanagement@hotmail.com)**:

- Current unexpired Drivers' License or State ID
- Social Security Card
- Last years' Form W2's from your job
- Last two paycheck stubs from your current jobs
- Proof of income statements (pension, social security, NOT A BANK STATEMENT)
- Schedule "C" from last years' personal tax return OR
- Last years' Federal Corporate or Business Tax Return with all Income Form 1099's