



# Parc Apartments

419 Laurel Lane  
Gahanna, Ohio USA 43230  
Tel: 614/389-8383 Fax: 614/532-1108  
[www.liveontheparc.com](http://www.liveontheparc.com)  
[theparc@liveontheparc.com](mailto:theparc@liveontheparc.com)

**WE ARE HAPPY THAT YOU STOPPED IN TO SEE US!**

Thank you for taking the time to look around the Model to see what we have to offer you.

👉 **What you can expect as a new resident** 👉

👉 **A PROFESSIONALLY MANAGED PROPERTY** 👉

- 24 HOUR EMERGENCY MAINTENANCE RESPONSE
- BUSINESS CENTER
- SWIMMING POOL
- GYM/FITNESS ROOM

## APPLYING IS QUICK AND EASY

SIMPLY FILL OUT THE FOLLOWING:

- RENTAL/CREDIT APPLICATION (completely filled out). **NO CASH/UNDER TABLE INCOME APPLICATIONS WILL BE ACCEPTED!**
- Sign and date authorization to check **residential history**.
- One (1) current (within last 16 days) payroll stub is required with year-to-date income or four (4) if the stub does not record year-to-date income. Pay stubs and applications submitted before July 1 require previous year's W-2 or final pay stub.
- INCOME MUST BE VERIFIABLE by current pay check stubs, last year's tax return from current job, IRS Forms W-9 or 1099. No cash employment accepted. Business Owners must provide documentation of business operations with a fixed storefront address and copies of previous year's tax return. WORK-FROM-HOME operations are not acceptable proof of business operations.
- All adults (other than adult children still in school) who will live in the household are required to provide a state photo ID and social security card before application will be run for approval. Applicants having employment authorization cards issued by INS must also provide current permanent resident card or a visa good through the entire lease term. Copies of these documents will be taken for the file records. **EXPIRED DOCUMENTS ARE NOT ACCEPTABLE.**
- Pay the application fee. Must be a bank check or money order.

## 👉 RESTRICTIONS for ACCEPTANCE OF APPLICATION 👉

**The Application MUST be complete to be accepted!**

**All required documents for all adults MUST be provided for the application to be accepted!**

**All adults (age 18 years or older) must be present when application is returned!**

**THANK YOU FOR VISITING US! WE HOPE TO SEE YOU AGAIN SOON!**

### Office Hours

Monday-Friday 10:00 am - 6:00 pm

Saturday 10:00 am – 5:00 pm

Sunday 12:00 pm – 5:00 pm

## READ THIS AND ALL LEASE DOCUMENTS BEFORE SIGNING

IT IS PARC APARTMENTS' POLICY TO TREAT ALL CURRENT AND PROSPECTIVE RESIDENTS FAIRLY AND WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, SEXUAL ORIENTATION, MILITARY STATUS, FAMILIAL STATUS, AGE, DISABILITY, ANCESTRY, OR NATIONAL ORIGIN. APPLICANTS MUST BE OF LEGAL AGE AND ABLE TO CONTRACT.



### AVAILABILITY AND PUBLISHED RENTAL RATES:

Applications for apartment units will be accepted on a first come/first served basis and subject to the availability of the unit type requested. Advertised rental rates are subject to change without notice.

### No Smoking Policy

No smoking is permitted in the common areas or in any indoor area.

### Rental Applications

An application must be submitted for each adult who will be living in the apartment, excepting only adult children who are still in school. Any false information will constitute grounds for rejection of application.

We require with the application a non-refundable application fee of **\$40.00** per adult occupant, other than adult children still in school. The fee for a married couple's joint application is **\$60.00**.

### Administrative Fee

A non-refundable administrative fee of **\$ 100** is required to apply.

### Security Deposits and Holding Fees

A refundable security deposit is required at this community and is held as security for the resident's fulfillment of the conditions of the lease. An additional deposit to secure the payment of utilities may be required. Deposited funds may be applied to any or all of the tenant's obligations, and such use shall not prevent Landlord from claiming and collecting damages in excess of the deposit. A **\$ 250** holding fee will be required for applicants to hold a specific unit until application is reviewed for approval. A lease must be signed within 7 days of credit approval. A holding fee will guarantee a specific unit and rental rates for only 7 days after credit approval. You must sign a lease to secure a specific unit and rental rate. At signing of the Lease, the \$ 250 holding fee is applied to the Security Deposit. Failure to sign a lease may result in loss of the holding fee.

### Qualifying Standards

- **No Evictions or debt to prior landlords!**
- **Rental History:** Up to 24 months of positive rental history may be verified on present and previous residences. A positive record of prompt monthly payments, sufficient notice, and no damages are expected. An unsatisfactory rental history or mortgage history can be disqualifying. Lack or rental history will require either a higher deposit or a qualifying co-signer.
- **Credit Report:** An unsatisfactory credit report can also be disqualifying. An unsatisfactory credit report is one which reflects past or current bad debts, late payments or unpaid bills, liens, judgments, or undischarged bankruptcies. In addition:
  - Applicants who have filed bankruptcy must provide proof of discharge in order to be considered. Applicants with unpaid collections/write-offs other than medical bills and student loans may be required to pay off these debts before consideration will be given. An additional deposit may be required and re-established credit should be present.
  - Applicants with recent history of late/slow-pays may be required to pay an additional deposit.
  - If an applicant "passes with conditions" an additional deposit may be required.
- **Income:** A stable employment record of a minimum of one (1) year with current employer and income verification is required. An applicant must, in general, have gross monthly income equal to at least three (3) times the gross monthly rent. Acceptable income verification is two (2) of the most recent pay stubs, a letter from the employer in the event of transferring employment, the most recent IRS Form W-2; or, for self-employed applicants, a copy of the most recent tax return or certified verification from applicant's company accountant or bank.

- **Criminal History:** An applicant will be disqualified if the criminal history shows one or more of the following:
  - Arrests or convictions which show that the applicant may be a danger to others or to the safety or security the property.
  - Arrest of the applicant or a member of the applicant’s household within the last 12-month period or conviction of the applicant or a member of the applicant’s household within the prior sixty months for drug related activity.

**Evaluation**

We may, based on the above and any other lawful criteria, choose to reject, accept, or impose additional lawful requirements for accepting an applicant. These requirements may include without limitation additional documentation of income or employment, additional rental references, a higher deposit, and/or a co-signer.

**Co-Signers**

If a co-signer is required, he or she must complete an application and meet all income and qualifying standards AND WILL NOT BE AN AUTHORIZED OCCUPANT UNDER THE LEASE. A co-signer will be fully responsible for all of Tenant’s obligations under the Lease. A co-signer’s gross monthly income must be four and half times the monthly rent.

**Subletting**

Subletting is not permitted.

**Number of Occupants**

We have adopted the following guidelines for the number of permitted occupants but have the right to be flexible on a case-by-case basis. The ages and sexes of children will be considered and may require a larger apartment in order to accommodate all occupants.

<u>Apartment Size</u>	<u>Maximum Occupancy</u>
One Bedroom	Two Persons
Two Bedroom	Four Persons
Three Bedroom	Six Persons

**Roommates**

Each person must complete an application and qualify for the apartment. Each is fully responsible for the entire rental payment, and each must execute the lease agreement and its supporting documents.

**NO MORE THAN ONE (1) PET IS ALLOWED WITH A WEIGHT NOT TO EXCEED 40 LBS FULL GROWN**

Pet Fee (Non-Refundable)	\$250
Month Pet Fee	35

**Utilities**

Tenant is responsible for all utilities: electric, water, sewer, trash, phone, cable, etc.

# RENTAL APPLICATION

Please complete all requested information on all three pages of the application and read sign and date the authorization / consent part on page four. A separate application must be filled out for all adults in the household age 18 and older except when a married couple. Applications are not required for adult children who are still in school. They may be listed as additional occupants and will not be required to sign the lease. Thank you for your interest in our community.

Date of Application: \_\_\_/\_\_\_/\_\_\_

Desired Date of Move In. \_\_\_/\_\_\_/\_\_\_

Lease Data (to be completed after tenant is approved and address assigned)

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

Lease Start Date: \_\_\_\_\_ Lease Exp. Date: \_\_\_\_\_

Monthly Occ. Rent: \_\_\_\_\_ Pet Fee: \_\_\_\_\_

Monthly Gar. Rent: \_\_\_\_\_ Monthly Pet Rent: \_\_\_\_\_

FALSIFICATION OF ANY PART OF THE APPLICATION INCLUDING BUT NOT LIMITED TO IDENTIFICATION IS GROUNDS FOR REJECTION.

## PERSONAL INFORMATION

APPLICANT'S FULL NAME: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_

Social Security Number: \_\_\_\_\_ Driver's License No./State: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

SPOUSE FULL NAME: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_

Social Security Number: \_\_\_\_\_ Driver's License No./State: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Full Names of all Other Residents:	Relationship to you	Social Security Number	Date of Birth

## RENTAL/RESIDENT HISTORY

PRESENT ADDRESS: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Dates from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Monthly Payment: \$ \_\_\_\_\_

Present Landlord: \_\_\_\_\_ Landlords phone: \_\_\_\_\_

Reason for Moving: \_\_\_\_\_

PREVIOUS ADDRESS: \_\_\_\_\_

Dates from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_ Monthly Payment: \$ \_\_\_\_\_

Present Landlord: \_\_\_\_\_ Landlords phone: \_\_\_\_\_

Reason for Moving: \_\_\_\_\_

## EMPLOYMENT HISTORY

PRESENT EMPLOYER: \_\_\_\_\_ Dates from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_

Employers Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Your Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Salary: \$ \_\_\_\_\_

PREVIOUS EMPLOYER: \_\_\_\_\_ Dates from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_

Employers Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Your Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Salary: \$ \_\_\_\_\_

SPOUSE'S EMPLOYER: \_\_\_\_\_ Dates from \_\_\_/\_\_\_/\_\_\_ to \_\_\_/\_\_\_/\_\_\_

Employers Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Your Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Salary: \$ \_\_\_\_\_

## OTHER INCOME INFORMATION

TOTAL GROSS MONTHLY INCOME: \$ \_\_\_\_\_

If there are other sources of Income you would like us to consider, please list income, source and person (Banker, Employer, etc.) who we could contact for confirmation. You do NOT have to reveal alimony, child support, or spouse's annual income unless you want us to consider it in this application.

Amount \$ \_\_\_\_\_ Per: \_\_\_\_\_ Source: \_\_\_\_\_ Telephone: \_\_\_\_\_

Amount \$ \_\_\_\_\_ Per: \_\_\_\_\_ Source: \_\_\_\_\_ Telephone: \_\_\_\_\_

**VEHICLE INFORMATION**

TOTAL NUMBER OF VEHICLES THAT WILL USE OUR LOT (including company vehicles) \_\_\_\_\_

Make/Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Tag No./State: \_\_\_\_\_

Make/Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Tag No./State: \_\_\_\_\_

Other, Car, Motorcycle, etc. \_\_\_\_\_

**OTHER INFORMATION**

Has any applicant ever:	Been sued for non-payment of rent?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Been evicted or asked to move out?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Broken a Rental agreement or Lease?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Been sued for damages to a rental property?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Declared Bankruptcy?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Been convicted of a crime of violence?	<input type="checkbox"/> Yes <input type="checkbox"/> No

**PET (separate application required)**

Do you have dog(s) or cat(s)?  Yes  No

Dog/Cat: \_\_\_\_\_ Breed: \_\_\_\_\_ Color: \_\_\_\_\_ Rabies Tag #: \_\_\_\_\_

Dog/Cat: \_\_\_\_\_ Breed: \_\_\_\_\_ Color: \_\_\_\_\_ Rabies Tag #: \_\_\_\_\_

Any other pet(s)?  Yes  No What? \_\_\_\_\_

**Note: If you indicate you have no pets and want pets in the future you must fill out a pet application and be approved for pets prior to bringing them into your apartment.**

**REFERENCES/EMERGENCY CONTACT**

Personal References (Excluding immediate family)

Name	Relationship	Profession	Phone Number
1. _____			
2. _____			
3. _____			

Emergency Contact

Name	Relationship	Home Phone	Work Phone
1. _____			
2. _____			
3. _____			

**AUTHORIZATION/CONSENT**

I apply to lease the above premises. I certify that the above information is complete and truthful and consent to its verification through FABCO, a credit reporting agency. This may include but is not limited to an investigative consumer report concerning my creditworthiness, employment and education, social security verification, criminal and civil history, personal interviews, social networking and other internet sites and resources, BMV records, any other public records, and any other information bearing on my credit standing, credit capacity, character, general reputation, and my personal characteristics and trustworthiness. I authorize and consent to Landlord obtaining such a report.

I release the property owner, the owner's agent, FABCO, and all persons relying on or releasing information relative to this rental application from any and all liability in connection with the provision and use of such reports and the information provided above. I understand that this application does not constitute any oral or written commitment on the part of the property owner.

If the property owner accepts me as a tenant, I authorize the property owner to release my payment history to FABCO. A NON-REFUNDABLE application fee of \$\_\_\_\_\_ (Note: 40 for a Single Person or 60 for a married couple) is paid herewith for the purpose of verifying the information provided above, and a holding fee of **\$ 250.00** is deposited herewith to induce the property owner to hold the premises pending execution of a lease.

If my rental application is not approved, the holding fee will be returned to me provided the above information is completed and truthful. If my rental application is approved, the holding fee will be applied toward my security deposit and rent (if I enter into a lease) or applied to the property owner's rent loss, advertising costs, re-rental expenses, and other losses (if I do not enter into a lease).

Applicant's Signature _____	Date _____
Spouse's Signature _____	Date _____
Other Applicant Sig. _____	Date _____
Other Applicant Sig. _____	Date _____

<b>Gahanna Jefferson School District:</b>	<b>(School District Tax Code # 2506)</b>
<b>160 South Hamilton Road</b>	<b>(614) 471-7065</b>
<b>Gahanna, Ohio 43230</b>	

**Bus Stop located Hamilton & Kamilah**

**K-5<sup>h</sup> Grade: Jefferson Elementary (614) 478-5560**  
**136 Carpenter Road, Gahanna, Ohio 43230**  
**BUS # 22 Pick up : 7:00 AM Drop off: 2:50 PM**

**6-8<sup>th</sup> Grade: Gahanna Middle School East (614) 478-5550**  
**730 Clotts Road, Gahanna, Ohio 43230**  
**BUS # 98 Pick up : 8:30 AM Drop off: 3:30 PM**

**9-12<sup>th</sup> Grade: Gahanna-Lincoln High School (614) 478-5500**  
**140 South Hamilton Road, Gahanna, Ohio 43230**  
**BUS # 108 Pick up : 7:00 AM Drop off: 3:20 PM**

**Eastland Career Center**

<b>11-12<sup>th</sup> Grade: Eastland Career Center</b>	<b>(614) 836-5725</b>
<b>4465 South Hamilton Road,</b>	<b>Bus transfers from High School</b>
<b>Groveport, Ohio 43125</b>	

**FOR OFFICE USE ONLY**

Application accepted by \_\_\_\_\_

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

( ) Copy of state ID

( ) Copy of SS Card

( ) Other Identification

**Completed**

**Date**

Yes  No

\_\_\_/\_\_\_

**APPLICATION COMPLETED**

Yes  No

\_\_\_/\_\_\_

**APPLICATION FEE \$\_\_\_\_\_ M/O #: \_\_\_\_\_**

Yes  No

\_\_\_/\_\_\_

**PET APPLICATION  CAT  DOG (40lb limit)  NO PET**

Yes  No

\_\_\_/\_\_\_

**COURT VIEW PULLED**

Yes  No

\_\_\_/\_\_\_

**CREDIT VERIFIED Credit Score: \_\_\_\_\_ Credit Score: \_\_\_\_\_**

Yes  No

\_\_\_/\_\_\_

**CRIMINAL RECORD VERIFIED**

Yes  No

\_\_\_/\_\_\_

**RESIDENCY VERIFIED LENGTH OF TIME \_\_\_\_\_**

Yes  No

\_\_\_/\_\_\_

**EMPLOYMENT VERIFIED LENGTH OF TIME \_\_\_\_\_**

**Required Income: \$\_\_\_\_\_ Actual: \$\_\_\_\_\_**

Yes  No

**APPROVED**

**COMMENTS: \_\_\_\_\_**

Yes  No

**DENIED**

**REASON: \_\_\_\_\_**

Yes  No

**CANCELLED**

**REASON: \_\_\_\_\_**

**OPERATIONS MANAGER'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_/\_\_\_/\_\_\_**

**\_\_\_/\_\_\_/\_\_\_ DATE APPLICANT NOTIFIED \_\_\_\_\_/\_\_\_/\_\_\_ DATE REJECTION LETTER MAILED**

Yes  No

\_\_\_/\_\_\_

**SODA PROCESSED IF DEPOSITED RECEIVED PRIOR**

Assigned Address: \_\_\_\_\_ **Rent Amount \$ \_\_\_\_\_**

Apartment Style Wanted \_\_\_\_\_ **Deposit Balance \$ \_\_\_\_\_**

Rental Amount/Special \$ \_\_\_\_\_ **Pro-Rated Rent \$ \_\_\_\_\_**

Desired M/I Date \_\_\_/\_\_\_/\_\_\_ **Garage Rent \$ \_\_\_\_\_**

**Pro-Rated Garage \$ \_\_\_\_\_**

**Pet Fee \$ \_\_\_\_\_**

**Pet Rent \$ \_\_\_\_\_**

**Prorate Pet Rent \$ \_\_\_\_\_**

**TOTAL TO COLLECT AT M/I \$ \_\_\_\_\_**



Rev. 2016-03



# Parc Apartments

419 Laurel Lane  
Gahanna, Ohio USA 43230  
Tel: (614) 389-8383 Fax: (614) 532-1108



## PET APPLICATION

**PLEASE NOTE:** Pets are a serious responsibility and risk for each resident and employee in the apartment community. If not properly controlled and cared for, pets can disturb the rights of others and cause damages. Residents will be held liable for all damages caused by their animal and the resident may be required to remove the animal or face eviction.

### **PET POLICY:**

**NO PET MAY BE BROUGHT INSIDE YOUR APARTMENT, FOR ANY REASON, WITHOUT PRIOR WRITTEN PERMISSION FROM MANAGEMENT.**

**A ONE HUNDRED DOLLAR (\$ 100.00) ADMINISTRATION FEE SHALL BE CHARGED TO ANY RESIDENT'S RENTAL ACCOUNT THAT VIOLATES THIS POLICY, AND THE VIOLATION SHALL BE GROUNDS FOR AN EVICTION. IN ADDITION, ANY PET FOUND ON THE PREMISES MUST BE REMOVED BY THE RESIDENT WITHIN 24 HOURS OF THE NOTICE OF VIOLATION BY MANAGEMENT AND PROVIDE PROOF OF THE REMOVAL OF THE ANIMAL.**

**ONLY ONE (1) PET EVER IN A UNIT - 1 DOG OR 1 CAT**

**NO REPTILES OF ANY TYPE**

**NO EXOTIC PET**

**NO OTHER FUR BEARING ANIMALS ARE PERMITTED**

**NO VICIOUS OR INTIMIDATING ANIMAL (Note: even cats that appear to be intimidating may be rejected)**

### **PROOF OF THE FOLLOWING IS REQUIRED before approval of the pet:**

Current Dog license

Current Pet insurance for the protection of other residents and visitors

Current on rabies and distemper vaccinations records

Photo of the Pet

**WEIGHT LIMITATIONS: NO MORE THAN 40 POUNDS FULL GROWN**

**BREED RESTRICTIONS ARE: NO PITBULLS, DOBERMANS, CHOWS, MASTIFFS, HUSKIES, MALAMUTES, GREAT DAINS, ST. BERNARDS, GERMAN SHEPHERDS, BOXERS, NAKITTAS, OR ROTTWEILERS. \*\*\*NO AGGRESSIVE BREEDS OR ANIMAL\*\*\* (Note: NO CROSS BREEDS ARE ALLOWED EITHER.)**

**MANAGEMENT RESERVES THE RIGHT TO MAKE THE RESIDENT PROVIDE DOCUMENTATION OF BREEDING FROM A VETERINARIAN FOR ANY QUESTIONABLE ANIMAL.**

MANAGEMENT MUST MEET EACH ANIMAL, TAKE A PHOTOGRAPH OF EACH ANIMAL FOR THE FILES AND APPROVE THE ANIMALS, BEFORE THE ANIMAL CAN BE ALLOWED IN THE APARTMENT!!

**BREED ACCEPTANCE WILL BE SOLELY AT THE DISCRETION OF MANAGEMENT!**

**PET POLICY RULES:**

- 1) \$ 250 **non-refundable** pet fee.
- 2) \$ 35 **pet rent a month.**
- 3) Cats must be spayed or neutered and declawed.
- 4) Pets are not permitted to defecate, vomit, or otherwise make any mess on the property, common areas, sidewalks, halls, stairwells, and/or parking lots. Residents are responsible to clean up and dispose of wastes immediately. Residents will be charged \$ 25 for waste removal fee if waste is left.
- 5) Dogs and cats may not freely roam the property and **MUST be LEASHED WHEN OUTDOORS. (NO EXCEPTIONS).**
- 6) **PETS MAY NOT BE TETHERED OUTSIDE OF THE APARTMENT OR PATIO AT ANY TIME.**
- 7) Any damage to the property or your apartment due to the pet will be charged to your rental account. Resident shall pay for damages assessed to their rental account within 30 days of notice or the following months rent will not be accepted and eviction action will result.
- 8) Pet owners are fully and legally responsible for damages, injuries, or conditions that may occur or be caused by their pet(s). The Landlord or Landlords agents will not be held liable or accountable for damages or injuries due to pet owner's animal.
- 9) Residents shall take adequate precautions and the necessary measures to eliminate pet odors in the unit, and will maintain the unit in a sanitary condition at all times.
- 10) Resident shall not permit their pet(s) to disturb, interfere, and/or diminish the peaceful enjoyment of other residents. The term (disturb, interfere, and/or diminish) shall include but not limit to growling, chirping, biting, scratching, and other similar activities. Recurring complaints of disturbances of this nature shall constitute a violation of the lease and may result in the revocation of the pet permit, termination of the lease agreement, or both.
- 11) Pets are not permitted in the POOL AREA.
- 12) Pets are not permitted in the CLUB HOUSE.
- 13) Pets may not be left unattended for more than twenty-four (24) to forty-eight (48) hours. Management is not responsible for the care of your pet in cases like this and will notify the Human Society for the removal of uncared for animals.
- 14) Residents **MAY NOT FEED OR HARBOR STRAY ANIMALS.** The feeding of stray animals shall constitute having a pet without written permission and is considered a direct violation of the lease.
- 15) Residents are responsible for the safety and health of their pet during those scheduled occasions when the community is being exterminated. The Landlord and Landlord's agent is not liable for the ill health or death of a pet because of the periodic extermination treatment of your apartment.
- 16) In the event of the death of a pet, the resident shall properly remove and dispose of the remains. The remains shall **NOT** be placed in the dumpsters of the property or in any other container belong to the Landlord.
- 17) The Resident will be fully responsible for extermination of fleas from the full building, should there become a problem in their apartment or their neighbor's apartment due to infestation.
- 18) Pet Rent is considered part of rent each month and must be paid with the rental payment each month.
- 19) Residents **MUST** immediately remove any animal that becomes viscous or aggressive. Failure to do so is grounds for immediate eviction action from the property.

### RESIDENT'S INFORMATION

NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_

APARTMENT ADDRESS: \_\_\_\_\_

We are requesting that we be allowed to add the following Pet or Pet to our Lease:

### DOG

NAME OF PET: \_\_\_\_\_ BREED: \_\_\_\_\_

AGE: \_\_\_\_\_ WEIGHT: \_\_\_\_\_ COLOR(S): \_\_\_\_\_

CITY LICENSE #: \_\_\_\_\_ DATE OF LAST RABIES: \_\_\_\_\_

HOUSE BROKEN:  Yes  No SPAIED OR NEUTERED:  Yes  No

NAME OF VETERINAIN: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No: \_\_\_\_\_

### CAT

NAME OF PET: \_\_\_\_\_ BREED: \_\_\_\_\_

AGE: \_\_\_\_\_ WEIGHT: \_\_\_\_\_ COLOR(S): \_\_\_\_\_

CITY LICENSE #: \_\_\_\_\_ DATE OF LAST RABIES: \_\_\_\_\_

HOUSE BROKEN:  Yes  No SPAIED OR NEUTERED:  Yes  No

NAME OF VETERINAIN: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No: \_\_\_\_\_

**PLEASE NOTE:** Pets are a serious responsibility and because there are times when residents cannot always care for their animals we require that you provided us information on who would be coming by your apartment to care for your animal or who we have authorization to allow access to your animal in the event you are unable to provide them with care. If you have not given a care givers information the Human Society would be contacted to pick up any animal that is left unattended for more than a TWO (2) days.

### CARE GIVER'S INFORMATION

Name of person to care for my pet in case of illness:

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: DAYTIME \_\_\_\_\_ EVENING: \_\_\_\_\_

It is understood that this is just an application and the animal or animals may not be brought to the apartment without the completion of the Pet Addendum, which is management's proof of approval of the animal(s). We also, full understand that we may not substitute any other animal for an approved animal, that each animal must be approved. It is further understood that in the event an animal becomes viscous or aggressive that the animal **MUST** immediately be removed from the property to avoid management's termination of the lease agreement.

Tenant: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_ Tenant: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

Tenant: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_ Tenant: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

**FOR OFFICE USE ONLY**

Application accepted by \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

( ) Copy of Dog License Tag ( ) Copy of Vaccination Record ( ) Veterinarian Information

Completed                      Date

Yes  No                      \_\_\_/\_\_\_

**APPLICATION COMPLETED**

Yes  No                      \_\_\_/\_\_\_

**PET FEE \$ \_\_\_\_\_**

Yes  No                      \_\_\_/\_\_\_

**PET(S) PHOTO**

Yes  No                      \_\_\_/\_\_\_

**PET(S) PROOF OF LICENSE (DOG)**

Yes  No                      \_\_\_/\_\_\_

**PET(S) COPY OF VETENERIAN RECORD**

**APPLIACATION APPROVED**

\_\_\_/\_\_\_/\_\_\_ **DATE APPLICANT NOTIFIED**

**DENIED**

\_\_\_/\_\_\_/\_\_\_ **DATE REJECTION LETTER MAILED**

Yes  No                      \_\_\_/\_\_\_

**DENIED REASON: \_\_\_\_\_**

Yes  No                      \_\_\_/\_\_\_

**CANCELLED REASON: \_\_\_\_\_**

Approved by: \_\_\_\_\_ M/I Date \_\_\_/\_\_\_/\_\_\_



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419 Laurel Lane  
Gahanna, Ohio USA 43230  
Tel: (614) 389-8383 Fax: (614) 532-1108



## RESIDENTIAL HISTORY

### PLEASE SIGN & DATE

#### Authorization:

I/We authorize Parc Apartments to verify my past rental history and authorize all past landlords and their agents to release to Parc Apartments my history as a tenant, including the information requested below and any other relevant information requested by Parc Apartments. I release the property owner, the owner's agent, FABCO, and all persons relying on or releasing information relative to this rental application from any and all liability in connection with the provision and use of such reports and the information provided above. I understand that this application does not constitute any oral or written commitment on the part of the property owner.

\_\_\_\_\_  
Applicant's signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

APPLICANTS SHOULD NOT WRITE BELOW THIS LINE

**BELOW TO BE COMPLETED BY LANDLORD ONLY**

\_\_\_\_\_ has/have applied for residency at The Parc Apartments. Please take a moment to answer the following questions regarding their history with you at the \_\_\_\_\_. Please fax this back to (614) 532-1108 at your earliest convenience.

1. Lease dates: Move In: \_\_\_\_/\_\_\_\_/\_\_\_\_ Move Out: \_\_\_\_/\_\_\_\_/\_\_\_\_
2. Monthly lease amount: \_\_\_\_\_ Due by: \_\_\_\_\_
3. Do you show any late payments? \_\_\_\_\_ How many? \_\_\_\_\_
4. Do you show any NSF's? \_\_\_\_\_ How many? \_\_\_\_\_
5. Is there a current balance due? \_\_\_\_\_ How much? \_\_\_\_\_ For what? \_\_\_\_\_
6. Have there been any problems or damage? \_\_\_\_\_
7. Has there been any pests reported or treated in the unit?  Yes  No
8. Are they the only occupant(s) in the unit? \_\_\_\_\_ How many? \_\_\_\_\_
9. Would you rent to them again? \_\_\_\_\_
10. Have they given notice to vacate?  Yes  No

Comments: \_\_\_\_\_

Thank you in advance for your cooperation.

Your Signature: \_\_\_\_\_ Your title: \_\_\_\_\_

