

# Fountain Parc

## Apartments & Townhomes

4912 Whitton Place, D  
Indianapolis, IN 46220  
(317) 253- 4205 Fax (317) 254-0197

### Deposit / Fee Form

Move- In Date: \_\_\_\_\_

Lease Dates: \_\_\_\_\_

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

Phone: \_\_\_\_\_

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

Building \_\_\_\_\_ Unit \_\_\_\_\_

	Amount	Date Paid	Rcvd. By
Application Fee (Non- refundable)	_____	_____	_____
Security Deposit	_____	_____	_____
Administration (Non-refundable)	_____	_____	_____
TOTAL AMOUNT RECEIVED	_____		
TOTAL DUE FOR ABOVE	_____		

**If for any reason my application should be declined, I will receive a refund in full, less the application fee that is non-refundable. I understand I may cancel this application within 72 hours and receive a full refund. If I cancel after 72 hours, or fail to execute the Management's Lease Agreement, I understand I automatically forfeit all moneys paid to cover expenses due by my cancellation. This agreement is not considered valid until Management approves terms and conditions by signing below.**

Management routinely completes credit, criminal checks and verifications of all applications. This application is NOT considered approved until all verification is complete. Identification is required with all applications. Once verification is complete, applicant will be notified regarding approval for residency.

\_\_\_\_\_  
Applicants Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
By: Woodrow A. Neil as trustee of  
Woodrow A Neil Living Trust, As Manager

\_\_\_\_\_  
Date

# Hawthorn Heights, LLC DBA Fountain Parc

## Application Cover Sheet

(A \$30 Non-Refundable Fee is required to process the application)

### All applicants will be approved on the following basis:

1. Must be currently employed and have verifiable, stable employment history.
2. Credit report must be positively rated. Medical and student loans not counted.
3. Four years past and present resident history must be in good standing, and must be verifiable, with no balances owed or prior evictions. MUST HAVE MINIMUM 1 YEAR OF RENTAL HISTORY
4. Income based on monthly income, and credit obligations.
5. Criminal History: We do not allow a person or persons that have been convicted of a felony, dishonesty, violence, battery, or personal injury to occupy or visit our community. A criminal record will be obtained on every applicant. \*These reports are obtained for the purpose of protecting the property, and are **not intended** to protect the residents from acts by other residents or non-residents.

\*\*All applicants must sign the lease prior to move-in or no keys can be issued.

\*\*All applicable utilities must be transferable into a residents name prior to move-in or no keys will be issued.

.....  
Management Policy: "To provide our residents with a quiet, peaceful environment." Loud noises from automobile radios, apartment TV's, stereos, or parties are lease violations and are strictly enforced.

Vehicle Policy: 1) Motorcycles, boats, and recreational vehicles must be parked in a paid carport. 2) We do not allow damaged, unsightly or inoperable vehicles (rusted, dented or missing body parts, missing hub caps, broken windows, excessive fluids leaking on the ground, etc...) on the property.

I have read the above qualifications and policies, and had the opportunity to ask questions of the representative. The above qualifications and policies are fully understood and are part of the Lease and Rules and Regulations.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

# LEASE APPLICATION

Community Name in which you are applying for: \_\_\_\_\_

Date \_\_\_\_\_ Apartment Type \_\_\_\_\_ Apartment No. \_\_\_\_\_

Apartment Address \_\_\_\_\_ Tentative Move-In Date \_\_\_\_\_

Rent Per Month \_\_\_\_\_ Security Deposit \_\_\_\_\_ Re-dec fee: \_\_\_\_\_

Pet Deposit \_\_\_\_\_ Monthly Pet Fee \_\_\_\_\_ Application fee(s) \_\_\_\_\_ Carport Fee \_\_\_\_\_

Special \_\_\_\_\_

## RESIDENT INFORMATION

PLEASE PRINT

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Marital Status \_\_\_\_\_ Birthday \_\_\_\_\_ Phone \_\_\_\_\_

Social Security No. \_\_\_\_\_ Drivers License No. \_\_\_\_\_ State \_\_\_\_\_

## RESIDENT HISTORY

Present Address \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_ Rent/  
Own \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State/ Zip- Code \_\_\_\_\_ Mo./Yr. \_\_\_\_\_ Mo./  
Yr. \_\_\_\_\_

Landlord's Name  
Or Mortgage  
Holder \_\_\_\_\_  
Name \_\_\_\_\_ Address \_\_\_\_\_ Phone No. \_\_\_\_\_ Monthly Payment \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Previous Address \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_ Rent/  
Own \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State/ Zip Code \_\_\_\_\_ Mo. /Yr. \_\_\_\_\_ Mo. /Yr. \_\_\_\_\_

Landlord's Name  
Or Mortgage Holder \_\_\_\_\_  
Name \_\_\_\_\_ Address \_\_\_\_\_ Phone No. \_\_\_\_\_ Monthly Payment \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Have you ever broken a lease or been evicted? \_\_\_\_\_ Why? \_\_\_\_\_

## EMPLOYMENT INFORMATION

Present  
Employer \_\_\_\_\_  
Name & Address \_\_\_\_\_ Phone No. \_\_\_\_\_

How  
Long \_\_\_\_\_  
Time \_\_\_\_\_ Net Monthly Income \_\_\_\_\_ Position \_\_\_\_\_ Immediate Supervisor \_\_\_\_\_

Previous  
Employer \_\_\_\_\_  
Name & Address \_\_\_\_\_ Phone No. \_\_\_\_\_

How  
Long \_\_\_\_\_  
Time \_\_\_\_\_ Net Monthly Income \_\_\_\_\_ Position \_\_\_\_\_ Immediate Supervisor \_\_\_\_\_

## Referred By:

Others to reside in apartment  
Name: \_\_\_\_\_ Relationship \_\_\_\_\_ Date of Birth \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Criminal History**

Have you, or any of your occupants, ever been convicted of a felony or battery, dishonesty or violent behavior, including personal injury? \_\_\_\_\_  
If Yes, Explain: \_\_\_\_\_

**CREDIT INFORMATION**

Bank \_\_\_\_\_  
Name \_\_\_\_\_ Address \_\_\_\_\_ Monthly Balance \_\_\_\_\_  
Or Savings \_\_\_\_\_

Do you pay or receive child support? \_\_\_\_\_ Yes \_\_\_\_\_ No if yes, please explain \_\_\_\_\_  
I/We hereby certify that the above information is correct \_\_\_\_\_ (initial)

**OTHER INFORMATION**

**Vehicle Information (2 cars allotted per apartment)**

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_ License Plate# \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_ License Plate# \_\_\_\_\_

**Pet Information**

Has your pet ever harmed or endangered any person or animal? \_\_\_\_\_

Dog (Type) \_\_\_\_\_ Weight \_\_\_\_\_

Cat (Type) \_\_\_\_\_ Weight \_\_\_\_\_

**Others approved for occupancy or visitation:**

Name \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_

If divorced, will any children visit at anytime? \_\_\_\_\_ Length of Time \_\_\_\_\_

**Intial** \_\_\_\_\_ a non-refundable application fee of \$30 is given by the applicant to depreciate the expense incurred by the landlord to process the application.

**Intial** \_\_\_\_\_ obtaining a pet requires consent of management, payment of applicable fees/deposits, and execution of the pet addendum. Failure to report a new pet will result in being charged back to the month of move-in, plus all fess and late charges.

**Intial** \_\_\_\_\_ Tenant insurance: We are not responsible for damages to personal property or providing other accommodations in the event the apartment becomes inhabitable for any reason. The tenant is required to ensure that their own insurance, covers all of their personal property. It is a further condition of our renting promise to the tenant that tenant has obtained liability insurance covering any damages that might be caused to the premises by the tenant, Their invitees or guests, the insurance shall be provided by an insurance company acceptable to the landlord.

Should management become aware hereafter that the information provided here in by the applicant, and or occupants, relating to past criminal history, management may deem the provision of said false statement or statements as an act of default of any lease agreement entered into hereafter by applicant for the rental of the apartment. In such an event, management and or the lessor, of said lease may elect to exercise any and all remedies available in said lease, for default there of by applicant, including but not limited to the immediate right to re-enter and reoccupy the subjects rented apartment and to remove all person and property there from.

**EMERGENCY CONTACT**

Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Relationship \_\_\_\_\_ Address \_\_\_\_\_

**\*\*SECURITY DEPOSIT IS NON-REFUNABLE AFTER 72 HOURS IF CANCELLATION OCCURS BY APPLICANT\*\***

**APPLICANT'S CONSENT**

**Applicant hereby represents that the above information is true and correct.**

It is my/our understanding that this application is preliminary only and involves no obligation of the owners or its agent to approve this application or to deliver occupancy of the proposed premises. The applicant(s) appearing below hereby authorize the holder of the lease application to investigate his (their) past history of applicant(s) occupancy, history of any apartment community or dwelling, and whatever credit bureaus or other sources the apartment owner or agent deems necessary in determining approval of the application. If the owner or its agent accepts this application, the deposit herewith paid will be applied to the total security deposit due.

Applicant(s) further agrees that if the application is rejected or cancelled by management, for whatever reason the application fee will be retained as a processing fee. If applicant is approved and applicant fails to enter into the lease agreement, the full application deposit shall be forfeited. Please read and understand this policy prior to signing this document. Keys will be furnished only after the lease and other rental documents have been accepted by all parties and only after applicable rentals security deposits and pet deposits have been paid.

\_\_\_\_\_  
Applicants Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
By: Woodrow A. Neil as trustee of \_\_\_\_\_ Date \_\_\_\_\_  
Woodrow A Neil Living Trust, As Manager

**Fountain Parc Apartments**  
**4912 Whitton Place, D**  
**INDIANAPOLIS, INDIANA 46220**  
**BUS: (317) 253-4205**  
**FAX: (317) 254-0197**

To Whom It May Concern:

Fountain Parc Apartments is interested in verifying the following information on your current employee. The individual listed below has applied for an apartment, and in order to process their application, this information is necessary.

Please fax the following information to: (317) 254-0197. Please be sure to include your phone number, in case there are any questions. Thank you.

Employee's Name \_\_\_\_\_

Social Security # \_\_\_\_\_

Gross Monthly Income \_\_\_\_\_

Employment Dates \_\_\_\_\_

\_\_\_\_\_  
*Applicant's Signature*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Verifying Signature*

\_\_\_\_\_  
*Printed Name*

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

*Phone Number* \_\_\_\_\_

*Thank you for your assistance,*

**Fountain Parc Apartments**  
**4912 Whitton Place, D**  
**INDIANAPOLIS, INDIANA 46220**

*BUS: (317) 253-4205*

*FAX: (317) 254-0197*

**To Whom It May Concern:**

Fountain Parc Apartments is interested in verifying the following information on your current resident. The individual listed below has applied for an apartment, and in order to process their application, this information is necessary.

Please fax the following information to: (317) 254-0197. Please be sure to include your phone number, in case there are any questions. Thank you.

**Resident's Name** \_\_\_\_\_

**Social Security #** \_\_\_\_\_

**Address** \_\_\_\_\_

\_\_\_\_\_  
**Applicant's Signature**

**Lease Dates** \_\_\_\_\_ **Rental Amount** \_\_\_\_\_

**Has notice been given?** \_\_\_\_\_ **Is lease up?** \_\_\_\_\_

**Does Resident pay on time?** \_\_\_\_\_ **How many late payments?** \_\_\_\_\_

**Any NSF's?** \_\_\_\_\_ **How many?** \_\_\_\_\_

**Any complaints?** \_\_\_\_\_

**Would you re-rent to this resident?** \_\_\_\_\_

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Verifying Signature*

\_\_\_\_\_  
*Printed Name*

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

**Phone Number** \_\_\_\_\_

*Thank you for your assistance,*