Great Location:
Located inside the Beltline- just north of downtown Raleigh
Walk to Seaboard Shops and Restaurants
Minutes from Cameron Village
Conveniently located near I-440 and I-40
On CAT bus route
Walk to the R-LINE Stop on Peace Street

Unique concept….a true neighborhood with tree lined sidewalks and a Community Park
  2 Bedrooms = Brick townhomes
  3 Bedrooms = Detached houses south of Cedar Street
Beautiful Landscaping – no grass to cut – we do it all!
Variety of floorplans to choose…some of the largest rentals in the area!
Built in the fall of 2003

Cable & Phone jacks in each room
Full Size Washer/Dryer connections

Pet friendly = One pet per household with a 25 lb limit
On-site Daycare Facility (Halifax Street)
On-site City Parks and Rec. Center (Halifax Street)

APPLE TODAY!
$60 APPLICATION FEE
Money Order or Personal Check only
Management will verify:
  *Landlord References
  *Criminal Background
  *Income Sources (minimum = 3 times the monthly rent)
  *Credit History
  *Copy fee=.25 cents per sheet

Deposit Required = Equal to One Month’s Rent ......(Separate Pet Deposit of $500)
12-Month Lease Term

CALL OUR STAFF AT 831-6045
911 N. Blount Street
Raleigh, NC  27604

(04/2014)
**FOR OFFICE USE ONLY**

PROPERTY NAME: \textit{CAPITOL PARK} \quad DATE OF APPLICATION: \quad \square \textit{MR} \quad \square \textit{Wheelchair Accessible}

ADDRESS APPLYING FOR: ________________________________

APPLICANT’S LAST NAME: ______________________ UNIT SIZE: _______ STAFF INITIALS: ____________

PLEASE ANSWER ALL QUESTIONS:

NUMBER OF BEDROOMS NEEDED:  
\quad \square 1BR. \quad \square 2BR \quad \square 3 BR  

HOW DID YOU HEAR ABOUT CAPITOL PARK?

HOUSEHOLD COMPOSITION:

<table>
<thead>
<tr>
<th>LIST ALL PEOPLE TO OCCUPY HOME:</th>
<th>SOCIAL SECURITY#</th>
<th>DATE OF BIRTH</th>
<th>DRIVERS LICENSE/STATE ID NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>LAST NAME, FIRST, MI</td>
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</table>

EMAIL ADDRESS: __________________________________________

PRESENT ADDRESS: ________________________________________

PHONE: ___________________________ WORK: _________________________

CELL: ____________________________

MGMT/MORTGAGECOMPANY: ____________________________

LANDLORD PHONE: ____________________________

HOW LONG AT PRESENT ADDRESS

DATE MOVED IN__________________ DATE MOVED OUT__________________

OWN OR RENT? __________________ AMOUNT OF MONTHLY RENT/MORTGAGE: $____________________

REASON FOR MOVING: ____________________________________________

*******

PREVIOUS ADDRESS: ______________________________

MGMT/MORTGAGECOMPANY: ____________________________

LANDLORD PHONE: ____________________________

HOW LONG AT PREVIOUS ADDRESS

DATE MOVED IN__________________ DATE MOVED OUT__________________

OWN OR RENT? __________________ AMOUNT OF MONTHLY RENT/MORTGAGE: $____________________

REASON FOR MOVING: ____________________________________________


(04/2014)
EMPLOYMENT/INCOME INFORMATION

APPLICANT INFORMATION

PRESENT EMPLOYER: __________________________________________________________
Address: ________________________________________________________________
Telephone Number: __________________ Fax: ______________________________
Dates of Employment: From: __________ To: __________
Position __________________ Supervisor __________________ Gross Monthly Salary $________
Number of Hours Worked per Week: __________

PREVIOUS EMPLOYER: ______________________________________________________
Address: ________________________________________________________________
Telephone Number: __________________ Fax: ______________________________
Dates of Employment: From: __________ To: _____________________________
Position __________________ Supervisor __________________ Gross Monthly Salary $________
Number of Hours Worked per Week: __________

OTHER SOURCE OF INCOME: ________________________________________________
Address: ________________________________________________________________
Telephone number: __________________ fax: _________________________________
Contact person: ___________________________ Gross Monthly Amount $________

HOUSEHOLD MEMBER’S INFORMATION

PRESENT EMPLOYER: _________________________________________________________
Address: ________________________________________________________________
Telephone Number: __________________ Fax: ______________________________
Dates of Employment: From: __________ To: __________
Position __________________ Supervisor __________________ Gross Monthly Salary $________
Number of Hours Worked per Week: __________

PREVIOUS EMPLOYER: ______________________________________________________
Address: ________________________________________________________________
Telephone Number: __________________ Fax: ______________________________
Dates of Employment: From: __________ To: _____________________________
Position __________________ Supervisor __________________ Gross Monthly Salary $________
Number of Hours Worked per Week: __________

OTHER SOURCE OF INCOME: ________________________________________________
Address: ________________________________________________________________
Telephone Number: __________________ Fax: ______________________________
Contact Person who can verify: ___________________________ Gross Monthly Amount $________
BANKING REFERENCES

<table>
<thead>
<tr>
<th>ASSET</th>
<th>NAME OF BANK/INSTITUTION</th>
<th>PHONE NUMBER</th>
<th>ACCOUNT NUMBER</th>
<th>ACCOUNT BALANCE</th>
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<tbody>
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<td>No need to give Number</td>
<td></td>
<td>$</td>
</tr>
<tr>
<td>Savings Accounts</td>
<td></td>
<td>No need to give Number</td>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>

*GENERAL INFORMATION*

Have you or Co-Applicant ever been sued for non-payment of rent?........... Yes___ No____
Have you or Co-Applicant ever been evicted or asked to move out?........... Yes___ No____
Have you or Co-Applicant ever broken a Rental Agreement or Lease?........ Yes___ No____
   If yes, please explain_______________________________________
Have you or Co-Applicant declared Bankruptcy?............................ Yes___ No____
   If yes, what year?___________________________________________
Have you or Co-Applicant been convicted of a Felony?..................... Yes___ No____
Would you or any member of your household
   benefit from a Handicapped-Accessible Unit?......................... Yes___ No____
Does a household member require a Wheelchair Accessible home?......... Yes___ No____
Do you own a PET.......... Yes___ No____ If yes, what type/breed__________________________
   Weight at full maturity _________lbs. How Many Pets: _______ Fully housebroken ____Yes ___No
Veterinarian who can verify pet information/shot record______________________________

PLEASE LIST AN ALTERNATE ADDRESS AND PHONE NUMBER:

ALTERNATE CONTACT: Name ________________________________
   Address_____________________________________________
   Phone _______________________________________________

➢Please attach the following verifications when returning your application:<

1. State Issued Picture ID AND Social Security card for ALL adult family members
2. Proof of all Monthly Household Income (Copies of 4 weeks worth of consecutive pay stubs are fine)

BY SIGNING BELOW APPLICANT(S) AUTHORIZES MANAGEMENT AND ITS STAFF TO VERIFY INFORMA
TION THROUGH ANY AGENCIES, POLICE DEPARTMENTS, CREDIT BUREAUS, REFERENCES AND GROUPS OR ORGANIZATIONS TO OBTAIN ANY INFORMATION OR MATERIALS, WHICH ARE DEEMED NECESSARY TO COMPLETE THIS APPLICATION.

APPLICANT CERTIFIES THAT ALL INFORMATION IN THIS APPLICATION IS TRUE AND CORRECT. THE APPLICANT FURTHER CERTIFIES AND UNDERSTANDS THAT FALSE STATEMENTS OR INFORMATION IS PUNISHABLE BY LAW AND WILL LEAD TO CANCELLATION OF THIS APPLICATION OR TERMINATION OF TENANCY AFTER OCCUPANCY. I HAVE INCLUDED INFORMATION FOR ALL WHO (IF APPROVED) WILL LIVE ON THE PROPERTY.

SIGNATURE: ________________________________ DATE: _______________________
   (APPLICANT)
SIGNATURE: ________________________________ DATE: _______________________
   (APPLICANT)

(04/2014)