



Britannia Commons Apartments
234 Sherman Ave.
Meriden, CT 06450

Phone: 203-235-1526
Fax: 203-235-0788
Email: britanniacommons@trioproperties.com

Qualification Guidelines

Welcome to *Britannia Commons Apartments*. Trio Properties is pledged to the letter and the spirit of the U.S. Policy for the achievement of Equal Housing Opportunity throughout the nation. It is the policy of Trio to adhere to the Fair Housing Act, which prohibits discriminatory housing practices, based on color, religion, sex, handicap, familial status, or national origin.

Please note these are the current rental criteria and nothing in these requirements shall constitute a guarantee or representation by our community that all residents and occupants currently residing in our community have met these requirements. There may be residents and occupants that have resided here prior to these requirements going into effect: additionally, our ability to verify whether these requirements are met is limited by the information we receive from various resident reporting services.

Rental Criteria:

- A rental application must be completed for each individual age eighteen (18) or over, including guarantors if required. A fee of \$50.00 per applicant will be due prior to processing any application.
- The household gross monthly income must be verifiable and meet or exceed 2.5 times the monthly rent.
- Applicants must have verifiable employment and/or income history. Self-employed persons must provide a copy of the prior year’s tax return. Unemployed applicants must provide documentation regarding sources of income, e.g., social security, pension, savings, interest, or provide a guarantor/co-signer that meets the guarantor/co-signers qualifying standards below. Copies of all documentation will be retained in the lease file.
- Applicants must have a verifiable rental/mortgage history. Applicants with negative resident history, outstanding debt to an apartment community/landlord or eviction from apartment community/landlord, will be denied. Rentals from family members will be considered if a signed lease is provided. Guarantors/co-signers cannot be a substitute for this requirement.
- Applicants must have a favorable credit history. Favorable credit history is no credit or more positive credit than negative. All outstanding obligations will be considered. Any applicant with an unfavorable credit history will be denied, or must provide a guarantor/co-signer that meets the guarantor/co-signers qualifying standards below.
- Guarantors/co-signers must meet all the above qualifications and must additionally qualify for at least five (5) times the monthly rent of the apartment being applied for. The guarantor must physically sign the lease in the management office or have their signature notarized.
- Any applicant who has been determined to have less than favorable criminal history may be denied residency and occupancy. Guarantors/co-signers cannot be a substitute for this requirement.

Management reserves the right to add or delete any or all the above guidelines and qualifications.

Make check or money order payable to: 234 Sherman Avenue LLC

I have read and understand the Guidelines and Qualifications for Britannia Commons Apartments.

Prospective Resident (s)

Date

Prospective Resident (s)

Date





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APPLICATION FOR APARTMENT HOME RENTAL

NOTE: This ENTIRE application must be filled out or it may not be considered for acceptance. Please read qualifications prior to completing application. All applicants over 18 years of age must submit separate applications.

Last Name: _____ First Name: _____ MI: _____ Sr., Jr.,: _____

Social Security No. _____ - _____ - _____ Date of Birth: ____/____/____ Total No. of Occupants: _____

Home/Cell Phone: _____ Work Phone: _____ Best time to contact you: _____

Driver's License No.: _____ State: _____ Email: _____

Apt. size needed: _____ Desired move-in date, Earliest: _____, Latest: _____

How did you learn about Apartment? _____ **Your Rent Budget Amount: \$** _____

OCCUPANTS: (in addition to person listed above)

Name: _____ Relationship: _____ Sex: _____ Date of Birth: ____/____/____ SSN: _____

Name: _____ Relationship: _____ Sex: _____ Date of Birth: ____/____/____ SSN: _____

Name: _____ Relationship: _____ Sex: _____ Date of Birth: ____/____/____ SSN: _____

Name: _____ Relationship: _____ Sex: _____ Date of Birth: ____/____/____ SSN: _____

HOUSING INFORMATION:

Present Address: _____ City: _____ State: _____ Zip: _____

Move-in date: _____ Rent: \$ _____ Landlord (Co. or person): _____

Landlord's Phone: _____ Landlord's Fax: _____

Previous Address: _____ City: _____ State: _____ Zip: _____

Move-in date: _____ Rent: \$ _____ Landlord (Co. or person): _____

Landlord's Phone: _____ Landlord's Fax: _____

EMPLOYMENT INFORMATION:

Present Employer: _____ Address: _____

City: _____ State: _____ Zip: _____

Start Date: _____ Position: _____ Supervisor: _____

Supervisor's Phone: _____ H/R Phone: _____

Salary: \$ _____ per _____ Overtime/Bonus?: _____

Previous Employer: _____ Address: _____

City: _____ State: _____ Zip: _____

Dates Employed: _____ Position: _____

Supervisor: _____ Supervisor's Phone: _____ H/R Phone: _____

Annual Salary: \$ _____ Overtime/Bonus/Other?: _____

PETS:

Type _____ Breed _____ weight _____ name _____ age _____

Type _____ Breed _____ weight _____ name _____ age _____



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VEHICLE INFORMATION:

VEHICLE(S)/RECREATIONAL #1 (Year, Make, Model, Color): _____

License Plate #1: _____ State: _____

VEHICLE(S)/RECREATIONAL #2 (Year, Make, Model, Color): _____

License Plate #2: _____ State: _____

EMERGENCY:

Name: _____ Address: _____ City, State, Zip: _____

Work Phone: _____ Home/Cell Phone: _____ Relationship: _____

In the event of serious illness, death, or other circumstances that would make you unavailable, the emergency contact can remove your property from your apartment or the common areas.

Have you, your spouse, or any occupant listed in this application ever been evicted, filed bankruptcy, been convicted of a misdemeanor, a felony or sex related crime? Please date and list each:

I understand that this application for an apartment is subject to acceptance or denial. I hereby state that the information set for above is true and complete and authorize verification of the information and references given including the investigation of a professional credit check, convictions record and background check for all applicants. Should any statement made above be a misrepresentation or untrue, the application may be denied.

It is understood the holding deposit received, \$ _____, will be returned if applicant is not accepted as a resident. If accepted and the resident does not move in on the starting date given, the amount received is hereby acknowledge as liquidated damages for non-performance and will be forfeited by the resident as compensation for holding the apartment off the market. I understand I may cancel this application by written notice within 72 hours and receive a full refund of the holding deposit. **If I cancel after 72 hours, I understand I forfeit the holding deposit.**

I have submitted the sum of \$ _____, which is a **non-refundable application fee** for a credit check and other processing costs of this application. This sum is not a rental payment or security deposit and will be retained by Trio to cover the costs of processing the application whether my application is accepted or not.

I hereby consent to allow Trio, through its designated agent and it employees, to obtain and verify my credit information for the purpose of determining whether or not to lease an apartment to me. I understand that should I lease an apartment, Trio and its agent shall have the continuing right to review my credit information, rental application, payment history and occupancy history for account review purposes and for improving application review methods.

APPLICANT SIGNATURE: _____ **Date:** _____

LEASING SPECIALIST: _____ **Date:** _____



FOR OFFICE USE ONLY

1. APT # _____ UNIT TYPE: _____ Rental Rate Quoted: _____ Lease Term: _____

2. Concessions: _____

3. Person Accepting Application: _____ Date: _____

4. Person Processing Application: _____

5. Date the applicant(s) was notified by phone letter in person; of acceptance or non-acceptance: _____

6. Name of applicant who was notified: _____

7. Name of owner's representative who notified applicant above: _____



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EMPLOYMENT VERIFICATION

APPLICANT: Please complete the **top portion** of this form so that your employer may release the requested information.

APPLICANT: _____ DATE: _____

EMPLOYER NAME: _____

EMPLOYER'S ADDRESS: Street _____

City _____ State _____ Zip Code _____

Phone number: _____ Fax number _____

SIGNATURE: _____
Employee's Signature to authorize Release of Information

EMPLOYER: Your employee has applied for rental of an apartment managed by Trio. As part of the qualification process, we require verification of employment and the information requested below. Any information released will be kept in the strictest confidence. Please return this form via email, US Mail or facsimile to the number noted above. Thank you for your cooperation.

Trio Representative: _____ Date _____

Length of Employment: _____

Position: _____

Overtime/Commissions: _____

Average Monthly Pay: _____

Name & Title of Supervisor (Please print) Signature Date Phone

Please note: A Trio Representative may call to verify.





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LANDLORD REFERENCE

APPLICANT: Please complete the **top portion** of this form so that your current landlord may release the requested information.

APPLICANT: _____ DATE: _____

LANDLORD NAME: _____

LANDLORD'S ADDRESS: _____

Street

City State Zip Code

PHONE NUMBER _____ FAX NUMBER _____

SIGNATURE

 Resident's Signature to authorize Release of Information

LANDLORD: Your resident has applied for rental of an apartment managed by Trio. As part of the qualification process, we require a reference from the applicant's current landlord and basic information requested below. Any information released will be kept in the strictest confidence. Please return this form via email, facsimile or U.S. mail to the number or address noted above. Thank you for your cooperation.

Trio Representative _____ Date _____

Is applicant party to a lease/rental agreement? _____ If so, expiration date: _____

How long have they resided at the above address? _____

Is the rental account current? _____ Monthly Rent: _____

Rent is generally paid: _____ On-Time, _____ Occasionally Late, _____ Often Late

Have any legal notices been served to this resident? _____

Have there been any complaints against this resident? _____

Housekeeping Habits: _____ Good, _____ Average, _____ Poor

Would you rent to this person again? _____ Yes, _____ No _____ Not Sure

Comments: _____

Name & Title of Authorized Person _____
 (Please Print)

Phone: _____

Signature _____

Date _____



BRITANNIA COMMONS APARTMENTS

Disclosure of Information on Lead-Based Paint and/or Lead-Based Paint Hazards

Lead Warning Statement

Housing built before 1978 may contain lead-based paint. Lead from paint, paint chips, and dust can pose health hazards if not managed properly. Lead exposure is especially harmful to young children and pregnant women. Before renting pre-1978 housing, lessors must disclose the presence of known lead-based paint and/or lead-based paint hazards in the dwelling. Lessees must also receive a federally approved pamphlet on lead poisoning prevention.

Lessor's Disclosure (initial)

(a) Presence of lead-based paint or lead-based paint hazards (check (i) or (ii) below):

____ (i) Known lead-based paint and/or lead-based paint hazards are present in the housing (explain).

- **Pre 1978 Building Please see attached report excerpts as described**

(ii) ____ Lessor has no knowledge of lead-based paint and/or /lead-based paint hazards in the housing

(b) Records and reports available to the lessor (check (i) or (ii) below):

____ (i) Lessor has provided the lessee with all available records and reports pertaining to lead-based paint and/or lead-based paint hazards in the housing (list documents below).

- **Phase I ESA dated 8/18/15, pg.21**
- **Phase I ESA dated 7/9/12, pg.29**
- **Phase I ESA dated 6/1/04, pgs. 4,7,12**
- **Complete records and reports are available in the Management Office for review, copies of these reports are available upon request at no cost.**

(ii) ____ Lessor has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

Lessee's Acknowledgment (initial c and d)

(c) ____ Lessee has received copies of all information listed above.

(d) ____ Lessee has received the pamphlet *Protect Your Family From Lead in Your Home*.

Agent's Acknowledgment (initial)

(e) ____ Agent has informed the lessor of the lessor's obligations under 42 U.S.C. 4852d and is aware of his/her responsibility to ensure compliance.

Certification of Accuracy

The following parties have reviewed the information above and certify, to the best of their knowledge, that the information provided by the signatory is true and accurate.

_____ Lessor	_____ Date	_____ Lessor	_____ Date
_____ Lessee	_____ Date	_____ Lessee	_____ Date
_____ Agent	_____ Date	_____ Agent	_____ Date

Rental Application Addendum for Non-U.S. Citizens

*Each resident and each occupant over 18 who is not a U.S. citizen must submit a separate application.
Spouses may submit a joint application.*

We are requesting you to fill out this Rental Application Addendum because you have indicated that you are not a U.S. citizen. We are asking all applicants who are not U.S. citizens to fill out this form. We are committed to compliance with fair housing laws and do not discriminate based on race, color, religion, sex, national origin, handicap or familial status. The purpose of this form is:

1. to give you the option to furnish information about an emergency contact person for you in your home country;
2. to verify that you are lawfully in the United States;
3. to determine whether your right to be in the U.S. expires during your Lease Contract term; and
4. to enable us to better cooperate with government officials in the performance of their duties, when requested.

We don't anticipate sharing this Supplemental Application with anyone except government officials who might inquire about you.

ABOUT YOU Your full name (*exactly as on any card or document issued by U.S. Immigration and Naturalization Service*): _____

Your place of birth. *Please indicate the city, state (region, province, etc.) and country:* _____

Country or countries of which you are a citizen (*list all*): _____

Approximately how long have you been in the United States? Years: _____ Months: _____

Have you ever been asked or ordered by a representative of any government to leave the U.S. or any other country?

Yes No If yes, please state when and what country or countries (*list all*): _____

Person in your home country whom we may contact in event of an emergency (*optional*).

Name: _____

Relationship: _____

Mailing address: _____

Email address: _____

Phone: _____

Please check the U.S. Immigration and Naturalization Service (INS) document that entitles you to be in the United States:

- Form I-551 Permanent Resident Card [Alien Registration Receipt Card] (form includes photo and fingerprint).
Card number: _____
- Form I-688 Temporary Resident Card (form includes photo and fingerprint).
Expiration date: _____ Card number: _____
- Form I-688A Employment Authorization Card (form includes photo and fingerprint).
Expiration date: _____ Card number: _____
- Form I-94 Arrival-Departure Record (form does not include photo or fingerprint).
Expiration date: _____ Form number: _____
- INS receipt for replacement of one of the above documents, with verification by INS of your entitlement to the above.

If you are relying on Form I-94, we will ask to see your passport and visa, and you will need to answer the questions below.

Country issuing your passport: _____

Your passport number: _____ Expiration date: _____

Do you have a visa? Yes No If yes, what type? student work visitor other (*specify*): _____

Visa expiration date: _____

We may ask to make a photocopy of any of the INS documents checked above and, if needed, your passport and visa.