



1502 East Osborn Road Phoenix, AZ 85014
 Phone: 602-297-2233 Fax: 602-264-4993



Please complete all sections—an incomplete application delays your approval!

Today's Date: _____ Desired Move-in Date _____
 Desired Lease Term: ___ Months ___ Years Target Rent \$ _____
 Unit type/Apt#: _____ **ID/Type** _____
 How did you hear about us _____
 Which features are most important for you in selecting ZaZu Pannee

APPLICANT _____ **CO-APPLICANT** _____ **SPOUSE** or _____ **SIGNIFICANT OTHER**

NAME (include jr or sr if applicable)		NAME (include jr or sr if applicable)	
SOCIAL SECURITY NUMBER	CELL PHONE NUMBER	SOCIAL SECURITY NUMBER	CELL PHONE NUMBER
DATE OF BIRTH	HOME PHONE NUMBER	DATE OF BIRTH	HOME PHONE NUMBER
DRIVERS LICENSE #	WORK PHONE NUMBER	DRIVERS LICENSE #	WORK PHONE NUMBER
NUMBER OF DEPENDANTS	EMAIL ADDRESS	NUMBER OF DEPENDANTS	EMAIL ADDRESS

APPLICANT _____ **RESIDENT HISTORY** _____ **CO-APPLICANT**

<p>PRESENT HOME ADDRESS (street , city, state, ZIP)</p> <p>Street _____ Apt # _____</p> <p>City _____ State _____ Zip _____</p> <p>_____ <i>Landlord's Name / Apartment Complex Name / FAX# or Email Address</i></p> <p>Rent Amount _____ Dates from _____ to _____</p> <p>___ Yes / No Do you presently, or have you had any Bed Bug issues in this apt. If, yes, please detail when and how resolved _____</p>	<p>PRESENT HOME ADDRESS (street , city, state, ZIP)</p> <p>Street _____ Apt # _____</p> <p>City _____ State _____ Zip _____</p> <p>_____ <i>Landlord's Name / Apartment Complex Name / FAX# or Email Address</i></p> <p>Rent Amount _____ Dates from _____ to _____</p> <p>___ Yes / No Do you presently, or have you had any Bed Bug issues in this apt. If, yes, please detail when and how resolved _____</p>
<p>FORMER HOME ADDRESS (street , city, state, ZIP)</p> <p>Street _____ Apt # _____</p> <p>City _____ State _____ Zip _____</p> <p>_____ <i>Landlord's Name / Apartment Complex Name / FAX# or Email Address</i></p> <p>Rent Amount \$ _____ Dates from _____ to _____</p> <p>___ Yes ___ No Do you presently, or have you had any Bed Bug issues in this apt. If, yes, please detail when and how resolved _____</p>	<p>FORMER HOME ADDRESS (street , city, state, ZIP)</p> <p>Street _____ Apt # _____</p> <p>City _____ State _____ Zip _____</p> <p>_____ <i>Landlord's Name / Apartment Complex Name / FAX# or Email Address</i></p> <p>Rent Amount \$ _____ Dates from _____ to _____</p> <p>___ Yes ___ No Do you presently, or have you had any Bed Bug issues in this apt. If, yes, please detail when and how resolved _____</p>

APPLICANT _____ **EMPLOYMENT INFORMATION** _____ **CO-APPLICANT**

<p>Current Employer _____ Self Employed _____</p> <p>Name _____</p> <p>Street _____ City _____ Zip _____</p> <p>Date From _____ to _____ Phone _____</p> <p>Supervisor _____ FAX Number _____</p> <p>Gross monthly income _____</p>	<p>Current Employer _____ Self Employed _____</p> <p>Name _____</p> <p>Street _____ City _____ Zip _____</p> <p>Dates From _____ to _____ Phone _____</p> <p>Supervisor _____ FAX Number _____</p> <p>Gross monthly income _____</p>
<p>Previous Employer</p> <p>Name _____</p> <p>Street _____ City _____ Zip _____</p> <p>Date From _____ to _____ Phone _____</p> <p>Supervisor _____ FAX Number _____</p> <p>Gross monthly income _____</p>	<p>Previous Employer</p> <p>Name _____</p> <p>Street _____ City _____ Zip _____</p> <p>Date From _____ to _____ Phone _____</p> <p>Supervisor _____ FAX Number _____</p> <p>Gross monthly income _____</p>

APPLICANT _____ **ADDITIONAL INCOME** _____ **CO-APPLICANT**

Source: _____	Source: _____
Contact/Phone: _____	Contact/Phone: _____
Monthly Amount: _____	Monthly Amount: _____

BANK REFERENCE (Individual or Joint Account)

Name of Bank: _____ Location: _____ Phone: _____

Checking Acct #: _____ Savings Acct #: _____ How Long? _____

**List Individuals Under 18 that will be occupying the apartment:
Maximum Occupancy is 2 persons for one bedroom /4 persons for two bedrooms**

Name _____ Relationship _____ Date of Birth _____

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Have you or your spouse broken a past rental agreement? Yes _____ No _____ Explain: _____

Have you or your spouse ever been evicted? Yes _____ No _____ Explain: _____

Have you or your spouse ever been convicted of a crime? Yes _____ No _____ Explain: _____

Have you ever been subject of or filed a restraining order? Yes _____ No _____ Explain: _____

Will there be any pets in the apartment? Yes _____ No _____ Explain: _____

Have you ever filed bankruptcy? Yes _____ No _____ Explain: _____

Have you had any judgments or liens filed against you? Yes _____ No _____ Explain: _____

Have you had any bedbugs in your most current residence? Yes _____ No _____ Explain: _____

How many TV's in your apartment? _____ How many vehicles do you plan to park on the property? _____

Make _____ Model _____ Year _____ Color _____ State _____ License # _____

Make _____ Model _____ Year _____ Color _____ State _____ License # _____

I acknowledge Zazu's mandatory air filter replacement and preventive pest control service the 2nd Wednesday of each month _____

In case of an emergency notify:

Name _____ Address _____ Relationship _____ Telephone Number _____

Name _____ Address _____ Relationship _____ Telephone Number _____

PLEASE READ CAREFULLY :

Application fees are non-refundable. Applicant represents that all of the above statements are true and complete, and hereby authorized verifications of above information references and credit records. Applicant acknowledges that false information contained herein constitutes grounds for rejection of this application if discovered before move in. Applicant acknowledges that management may not be able to complete comprehensive action of the Agreement before move in. Management reserves the right to verify application information after move-in and may convert the proposed Rent Agreement to a month-to-month term if misleading information is contained in this application. I warrant that all statements above set forth in this application are true, however, should any statement made above be a misrepresentation or not a true statement of facts, two-hundred fifty (\$250.00) dollars will be paid by the applicants to offset the agent's cost, time and effort in processing my application. In the event of fees, deposits or advance rent paid to the Property, the undersigned applicants authorize the Property to automatically deduct this amount from such funds.

Upon acceptance of this application, this deposit shall be retained and applied to applicants general account. When so approved and accepted I/We agree to execute a lease for 13 months before possession is given and to pay the balance of the security and other deposits within two (2) business/banking days after being notified of my acceptance. In the event that a Statement of Account Agreement is entered into then that document shall supercede this application in the event of a discrepancy between the two. If this application is not approved and accepted by the owner or agent, other than denied for untruthful application, the deposit will be refunded, the applicant hereby waiving any claim for damages by reason of non-acceptance, which the owner or his agent may reject without stating any reason for so doing.

I recognize that as part of Zazu Pannee's application processing, an investigative consumer report may be prepared. I authorize all contacted sources to release information they may have about me and release them from any liability and responsibility from doing so. A photographic or faxed copy of this authorization shall be as valid as the original. I understand that I may have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation.

Applicant may withdraw and cancel its application *prior* to approval for any reason whatsoever. Applicant may withdraw and cancel its application *after* approval in the event that the deposit amount requirements are twenty-five percent or greater than those estimated deposit amounts provided to Applicant. Specifically in either of these two instances Applicant understands, accepts, instructs and authorizes Management to retain an amount equal to the "Administrative Fee," (whether such fee was waived or to be collected) to offset the agent's cost, time and effort in processing of the application. In the event that deposit amounts held by the property had been provided by the Applicant through a credit card, certified funds or payment of any other kind accepted by the property, Applicant authorizes such funds to be withheld and forfeited to the Property with no additional authorization required. Additional conditions may apply and are contained in the Property's Statement of Account and/or Credit Card Authorization Voucher form. Such agreements shall prevail and supercede in the event of a conflict between it and any credit card company agreement.

Applicant's Signature _____ Date _____

Co-Applicant's Signature _____ Date _____

SALES DRAFT

Merchant Account: Oppenheimer Partners Properties
1502 EAST OSBORN ROAD
PHOENIX, AZ 85014
(602) 297-2233
4301347500112474

FOR OFFICE USE ONLY

Date Processed _____

Approval Code _____

Apartment Assignment _____

Today's Date: _____ Credit Card Number: _____ Expiration Date: _____

Credit Cardholders Name: First _____ Last _____ M.I. _____ Back of Card _____
(As it appears on the card) (Include Security # on back of card (in signature area))

Billing Address _____ State _____ Zip _____ Phone _____
(Where bill is currently sent)

Your initial here authorizes an automatic Credit Card payment the Landlord from your above Credit Card Account on the 1st day of each periodical rental period for the duration of the lease agreement & all lease extensions. This authorization shall supercede/prevail over any other or conflicting guidelines, regulations, agreements between the Landlord/Leaseholder as well as between the Cardholder/ its Authorizing Financial Institution. Signature below constitutes your agreement and authorization to the Card Issuer to make the payment as noted herein.

Charge Itemization:

Earnest Money: \$ 250.00
Application Fee: \$ 35.00/app

Total Charges (Authorized): \$ 285.00

The issuer of the card identified above authorizes Oppenheimer Partners, acting as agent for Zazu Pannee Park Regent Apartments, to charge the amount named on the "Total Charges" line above.

The cardholder instructs the issuing card company to pay the amount shown as TOTAL upon presentation. Cardholder promises to pay such Total (together with any other charges due thereon) subject to and in accordance with the agreement governing the use of such card. Any discrepancy between that agreement and these instructions, the Cardholder agrees that these instructions shall supercede and prevail.

Cardholder agrees that after application has been processed and approved by Zazu Pannee Park Regent the Earnest Deposit is non-refundable. Resident has been advised and accepts the booking terms: No refunds / cancellations or credits issued. Booking is non-refundable at processing of credit card. In the event of default Cardholder authorizes Zazu Pannee to charge any cancellation\ fees incurred as agreed in Card Holder's Move in Statement of Account to this credit card with no additional authorization required. Cancellation Charges are explained herein.

Signed

Please Print Name

Dated

Any deposits paid by credit card will be credited to the same account at move out and shall incur a 3% transaction fee, at move out. Applicant may cancel this guaranteed booking (1) prior to the scheduled move in date by paying a five hundred (\$500) dollar cancellation fee and any pre-paid earnest money is credited toward any cancellation fee due. If applicant cancels this booking (2) on or after the scheduled move in date, there is a cancellation fee equal to the equivalent of one month's rent. Pre-paid Earnest Money, Deposits and Fees are forfeited and not credited toward any cancellation fees. In the event that applicant fails to take possession of the unit on the scheduled move in date, Landlord may market and lease the premises to other prospective residents. Penalties due to the Landlord as a result of the non-fulfillment cancellation of this agreement are due and payable to the Landlord immediately. Failure to make such payments may result in legal action, court fees, and or collection fees, which shall be the responsibility of the applicant.

This authorization to charge the total amount to your credit card is an agreement between the parties and represents your understanding of, concurrence with and full acceptance of the booking terms above as well as those contained in the attached Statement of Account and Invoice.