



**APPLICANT'S AUTHORIZATION AND CONSENT  
FOR CRIMINAL HISTORY VERIFICATION**

GSF Properties Inc. places no interest higher than the safety and wellbeing of its residents. Because of this, GSF Properties Inc. will not rent to applicants with a history of criminal behavior showing a disregard for the health, safety and/or property of others. This form is designed to determine whether you meet the social interaction requirements for residency in a property managed by GSF Properties Inc. Your response to the following question will be subject to verification and any false response to the following questions will be subject to and/or result in termination of your rental agreement/lease.

Have you within the past 10 years been arrested for or charged with any crime involving:

Drugs - the possession, manufacture, sale, distribution or use of any controlled substance;

Weapons - the possession, manufacture, sale, distribution or use of any illegal weapon and/or the illegal possession, sale, distribution, use or discharge of any firearm;

Gangs - membership in or participation in the activities of any criminal street gang;

Sexual Crimes - including, but not limited to prostitution, pimping, pandering, rape, molestation, sodomy, stalking, and mayhem;

Injury or threatened injury to a person; Injury or threatened injury to property;

Theft - including but not limited to robbery and/or burglary;

Shoplifting, or passing bad or forged checks;

**and which arrest or charge resulted in a plea or finding of guilt, a conviction, a withheld adjudication or a deferred adjudication?**

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

If you answered YES to any of the questions above, then you are ineligible for residency in a property managed by GSF Properties Inc. If you answered NO to the questions above, please print your name and sign the authorization below so that your response may be investigated and verified.

I, \_\_\_\_\_, hereby authorize GSF Properties Inc. to verify any and all statements and representations, whether express or implied, made by me with respect to this Criminal History Verification form. This authorization is to include, but is not limited to, GSF Properties Inc. obtaining a **criminal background check** concerning me and I agree to furnish any further information and authorization as may be requested by GSF Properties Inc. to accomplish the task of verifying my statements and representations. I hereby authorize any person or entity to release to GSF Properties Inc. any and all information as may be requested by GSF Properties Inc. concerning the matters referred to in this Authorization and Consent for Criminal History Verification form.

**APPLICANT:**

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

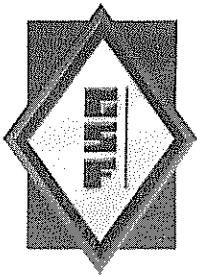
Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_



# I. CREDIT APPLICATION

DATE: \_\_\_\_\_

LEASE       MONTH-MONTH



APT. NAME \_\_\_\_\_

TYPE \_\_\_\_\_ UNIT \_\_\_\_\_ PKG. SPACE \_\_\_\_\_

## A. Applicant:

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Phone \_\_\_\_\_

Social Security Number \_\_\_\_\_ Driver's License No. \_\_\_\_\_ Any Pets? \_\_\_\_\_

Children/Dependents Living With you \_\_\_\_\_ Names \_\_\_\_\_ Ages \_\_\_\_\_

Present Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

From / To \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Name of Complex \_\_\_\_\_ Owner/Manager \_\_\_\_\_ Phone \_\_\_\_\_

Previous Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

From / To \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Name of Complex \_\_\_\_\_ Owner/Manager \_\_\_\_\_ Phone \_\_\_\_\_

Present Employer \_\_\_\_\_ From/ To \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Employed As \_\_\_\_\_ Amount \_\_\_\_\_ per \_\_\_\_\_

Hours Worked Per Month \_\_\_\_\_ Other Income \_\_\_\_\_

Bank and Branch \_\_\_\_\_

Checking Account Number \_\_\_\_\_ Savings Account Number \_\_\_\_\_

Explain Any Derogatory Credit \_\_\_\_\_

Monthly Obligations: Alimony \_\_\_\_\_ Child Support \_\_\_\_\_ Tax Liens \_\_\_\_\_ Car Payment \_\_\_\_\_

Automobile—Make \_\_\_\_\_ Color \_\_\_\_\_ Year \_\_\_\_\_ State of Registration \_\_\_\_\_

License No. \_\_\_\_\_ Legal Owner \_\_\_\_\_ Address \_\_\_\_\_

Name of Closest Relative / Friend \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

## B. Second Applicant: Co-Applicant / Co-Signer (Please specify)

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Phone \_\_\_\_\_

Social Security Number \_\_\_\_\_ Driver's License No. \_\_\_\_\_ Any Pets? \_\_\_\_\_

Children/Dependents Living With you \_\_\_\_\_ Names \_\_\_\_\_ Ages \_\_\_\_\_

Present Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

From / To \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Name of Complex \_\_\_\_\_ Owner/Manager \_\_\_\_\_ Phone \_\_\_\_\_

Previous Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

From / To \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Name of Complex \_\_\_\_\_ Owner/Manager \_\_\_\_\_ Phone \_\_\_\_\_

Present Employer \_\_\_\_\_ From/ To \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Employed As \_\_\_\_\_ Amount \_\_\_\_\_ per \_\_\_\_\_

Hours Worked Per Month \_\_\_\_\_ Other Income \_\_\_\_\_

Bank and Branch \_\_\_\_\_

Checking Account Number \_\_\_\_\_ Savings Account Number \_\_\_\_\_

Explain Any Derogatory Credit \_\_\_\_\_

Monthly Obligations: Alimony \_\_\_\_\_ Child Support \_\_\_\_\_ Tax Liens \_\_\_\_\_ Car Payment \_\_\_\_\_

Automobile—Make \_\_\_\_\_ Color \_\_\_\_\_ Year \_\_\_\_\_ State of Registration \_\_\_\_\_

License No. \_\_\_\_\_ Legal Owner \_\_\_\_\_ Address \_\_\_\_\_

Name of Closest Relative / Friend \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

APPLICANT(S) STATES THAT DATA PROVIDED ABOVE IS COMPLETE AND CORRECT AND APPLICANT(S) HEREBY AUTHORIZES GSF PROPERTIES INC. TO VERIFY THE ACCURACY OF THE DATA PROVIDED ABOVE BY, AMONG OTHER MEANS, ACQUIRING CREDIT REPORT(S) CONCERNING APPLICANT(S).

NOTE: A NON-REFUNDABLE APPLICATION FEE OF \_\_\_\_\_ IS REQUIRED TO PROCESS THIS APPLICATION

APPLICANT'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

CO-APPLICANT'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

