

Coldwell Banker Residential Brokerage

5114 Main Street, Downers Grove, IL 60515

C: 630-660-1292 O: 630-964-9696 F: 781-609-0654

<http://victorlopez.cbintouch.com> or <http://myplaceinchicago.com>

Coldwell Banker Apartment Application Instructions:

First find out what your credit score is. The landlord is usually looking for good credit score. Tell me the address you are applying for and I'll tell what credit score the landlord of that address is looking for. I don't want to knock down your credit score unnecessarily, if you don't meet the credit score the landlord is looking for to begin with. No collections whatsoever. Check your Trans Union credit score before Baird & Warner runs it by going to <https://www.creditkarma.com/> or <https://www.annualcreditreport.com/index.action>

- 1) Any tenant on the lease must text me their email and full name so I can send the tenant an invitation to apply for credit check and background check on <https://mysmartmove.com/>
- 2) Fill out both pages of rental application
- 3) Need copy of your driver's license or your passport ID and student ID
- 4) For employment verification I will need either
 - a. Your last 2 paystubs or
 - b. Last 2 months of bank statement or
 - c. Employment hiring letter or
 - d. Last 2 years of income tax form or
 - e. School housing financial letter
 - f. For cosigners, same criteria
- 5) \$40/tenant for credit, background & eviction check, \$40/cosigner only if Landlord request a cosigner
- 6) Your combined monthly income must be over 3 times what rent is to financially qualify for the apartment. Example For a \$1000/mth. rental, your combined monthly income must be over \$3000/mth., no less.
- 7) Go to <https://mysmartmove.com/> and fill out and pay the online application

MySmartMove.com will run the credit, background & eviction checks. **Coldwell Banker** does not accept applicants credit score print out information because it could be falsified. The credit check issues that we usually look for are: 1) No Evictions, 2) No criminal background, convictions, arrests of any type, 3) No utility bills in collections like gas and electrical bills 4) No car repo 5) No rent disputes in collections.

Check your credit scores before you apply because when we run your credit check, it will knock down your score. Call me when you have it filled out and ready to send it to me. Thanks.

Email apartment application to: victor.lopez@cbexchange.com
Fax apartment application: 781-609-0654

Victor M. Lopez

Broker Associate / Realtor

C: 630-660-1292

<http://myplaceinchicago.com>

<http://www.youtube.com/user/vmlprop1>

<http://www.forestparkrealestate.webs.com>

<https://www.facebook.com/ColdwellBankerVML>



RESIDENTIAL BROKERAGE
RENTAL DIVISION

Phone 1-888-FINDERS
www.chicagoapartmentfinders.com

RENTAL APPLICATION

AGENT:
LEASING CENTER:
RENTAL DATE:
REPLACEMENT: YES NO

Management Company/Owner:
Rental Address: Unit:
of Bedrooms/Size: Rent: \$ Admin Fee: \$ Security Deposit: \$
Move In Date: Move Out Date: Pet Fee/Deposit: YES NO Condo? YES NO

APPLICANT'S INFORMATION

Name:
SSN: D.O.B:
Driver's License: State:
Email:
Emergency Contact Name:
Emergency Contact Phone:

OTHER APPLICANTS (please list all co-applicants)

1.
2.
3.
Total Number of Occupants:
Children's Ages:
Pets (include type and size):

CURRENT ADDRESS: Rented Owned Other

Current Address:
City: State: Zip:
Current Landlord Name:
Current Landlord Phone:
Lease Terms: From: To:
Monthly Rent: \$

PREVIOUS ADDRESS: Rented Owned Other

Previous Address:
City: State: Zip:
Previous Landlord Name:
Previous Landlord Phone:
Lease Terms: From: To:
Monthly Rent: \$

INCOME: Employed Job Transfer Self-Employed Seeking

Current Employer:
Address:
City: State: Zip:
Supervisor: Phone:
Position:
Hire Date: Full Time Part Time
Monthly: \$
Additional Income: \$ Type:

PREVIOUS EMPLOYER OR OTHER SOURCE OF INCOME

Employer:
Address:
City: State: Zip:
Supervisor: Phone:
Position:
Hire Date: Full Time Part Time
Monthly: \$
Additional Income: \$ Type:

SCHOOL INFORMATION

Institution Name:
Address:

Course of Study:
Graduation Date: Full Time Part Time

AUTHORIZATION AND ACKNOWLEDGEMENT

Coldwell Banker Rental Division does its best to match properties and tenants, but does not accept or reject any application. The final review and determination regarding the suitability of the prospective tenant rests solely with the landlord. I authorize Coldwell Banker Rental Division and/or a representative of the landlord to check my credit, criminal record, employment and rental history and share that information with the property owner and/or representative of the landlord. Coldwell Banker Rental Division cannot be held responsible for any lease terms agreed between landlord and tenant or any errors or omissions on the lease.

SIGNATURE

DATE

CBRD does not discriminate in the sale, rentals and financing of dwellings on the basis of race, color, national origin, ancestry, religion, sex, age, familial status, marital status, parental status, handicap, disability, sexual orientation, transgender status, transsexual status, military status, unfavorable discharge from military service, source of legal income or any legally protected class.





LANDLORD VERIFICATION FORM

RESIDENTIAL BROKERAGE

RENTAL DIVISION

Phone 1-888-FINDERS
www.chicagoapartmentfinders.com

REQUESTING VERIFICATION FROM:

Property Owner/Rep:
Phone
Fax:
Email:

PLEASE FAX OR EMAIL BACK TO:

Leasing Agent:
Phone:
Fax:
Email:

I hereby authorize my landlord to disclose the information listed on the bottom portion of this form to COLDWELL BANKER RENTAL DIVISION.

APPLICANT'S CURRENT OR MOST RECENT LEASE ADDRESS

UNIT NUMBER

APPLICANT SIGNATURE

APPLICANT NAME (PRINTED)

DATE

FOR LANDLORD OR CBRD AGENT TO FILL OUT:

To Whom it May Concern:

Please complete the following as soon as possible and fax it back to Coldwell Banker Rental Division. This information is needed in order to complete an application for an apartment for the above named applicant.

Monthly Rent: \$

Has rent been paid on time? YES NO

Lease Term: From: / /

Would you rent to them again? YES NO

To: / /

Additional Comments:

Three horizontal lines for additional comments.

FAXED AUTHORIZATION PHONE AUTHORIZATION

LANDLORD'S REPRESENTATIVE (Please print)

CBRD AGENT NAME (Please print)

VERIFIER'S SIGNATURE (Person filling out this form)

DATE

Please complete and fax or email this form back to Coldwell Banker Rental Division using the number listed above. We appreciate your prompt response. Thank You!



EMPLOYMENT VERIFICATION FORM

RESIDENTIAL BROKERAGE
RENTAL DIVISION

Phone 1-888-FINDERS
www.chicagoapartmentfinders.com

REQUESTING VERIFICATION FROM:

Company Name:
Contact Name:
Phone:
Fax:

PLEASE FAX OR EMAIL BACK TO:

Leasing Agent:
Phone:
Fax:
Email:

I hereby authorize my employer to disclose the information listed on the bottom portion of this form to COLDWELL BANKER RENTAL DIVISION.

APPLICANT SIGNATURE APPLICANT NAME (PRINTED) DATE

SSN

FOR EMPLOYER OR CBRD AGENT TO FILL OUT:

To Whom it May Concern:
Please complete the following as soon as possible and fax it back to Coldwell Banker Rental Division. This information is needed in order to complete an application for an apartment for the above named applicant.
Employee Hire Date: ___ / ___ / ___
Position / Title: _____ Current Salary / Wage: \$ _____ per _____
Full Time Employee? [] YES [] NO Additional Compensation: \$ _____ per _____
If "No", how many hours per week? _____
Additional Comments:
[] FAXED AUTHORIZATION [] PHONE AUTHORIZATION
EMPLOYER'S REPRESENTATIVE (Please print) CBRD AGENT NAME (Please print)
VERIFIER'S SIGNATURE (Person filling out this form) DATE

Please complete and fax or email this form back to Coldwell Banker Rental Division using the number listed above. We appreciate your prompt response. Thank You!



RESIDENTIAL BROKERAGE
RENTAL DIVISION

Phone 1-888-FINDERS
www.chicagoapartmentfinders.com

RENTAL SUMMARY & RECEIPT

AGENT: _____

LEASING CENTER: _____ RENTAL DATE: _____

REPLACEMENT: Yes No

Management Company/Owner: _____

Rental Address: _____ Unit # _____

Backup Address: _____ Unit # _____

Lease Start Date: _____	Requested Move In Date: _____
Lease End Date: _____	_____

The Lease Start Date is the date set by the Landlord and is typically the first day of the month. The Move in Date is the actual date on which you receive keys or otherwise take possession of the apartment. Please note that if your Move in Date takes place before or is otherwise different from the Lease Start Date, the Landlord may require pro-rated rent for each day that you are in possession of the unit in advance of the Lease Start Date.

Please initial: ____/____/____/____/____/____

Is this a Condo? Yes No

I understand all condominium fees or deposits required in connection with moving in or moving out of a condominium building are my responsibility. These fees and deposits are set by the condominium association of each building and are subject to change or adjustment at any time. A move-in may not be able to be scheduled or permitted without advance payment of these fees and/or deposits.

Please initial: ____/____/____/____/____/____

Is Parking requested? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is Parking included in rent? <input type="checkbox"/> Yes <input type="checkbox"/> No
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I understand that parking availability and pricing is not guaranteed.

Please initial: ____/____/____/____/____/____

____ Garage ____ Tandem ____ Covered ____ Uncovered

I understand that unless I am submitting written repair requests with this application that I am applying for and accepting this unit on an "as is" basis in its current condition. If repairs are needed in the future, requests should be submitted directly to the landlord.

Please initial: ____/____/____/____/____/____

UTILITIES:	Included?	EXTRAS:	Included?
Heat	<input type="checkbox"/> Yes <input type="checkbox"/> No	Internet	<input type="checkbox"/> Yes <input type="checkbox"/> No
Electricity	<input type="checkbox"/> Yes <input type="checkbox"/> No	Cable	<input type="checkbox"/> Yes <input type="checkbox"/> No
Cooking Gas	<input type="checkbox"/> Yes <input type="checkbox"/> No	A/C	<input type="checkbox"/> Yes <input type="checkbox"/> No

PETS: (please list any pets)	How many?	Weight?

Pet Fee:	\$ _____	Pet Deposit:	\$ _____
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Rent:	\$ _____	Due:	_____
Application Fee:	\$ _____	Due:	_____
Admin Fee:	\$ _____	Due:	_____
Security Deposit:	\$ _____	Due:	_____
	\$ _____	Due:	_____
	\$ _____	Due:	_____

Total Due Today:	\$ _____
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PAYMENTS RECEIVED TODAY

Payable to:	Payment Type	Amount
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

PREVIOUS PAYMENTS:	\$ _____
TOTAL RECEIVED TODAY:	\$ _____
BALANCE DUE:	\$ _____

APPLICANT INFORMATION:

Name: _____ Phone: _____ Email: _____

Cosigner: _____ Phone: _____ Email: _____

Name: _____ Phone: _____ Email: _____

Cosigner: _____ Phone: _____ Email: _____

Name: _____ Phone: _____ Email: _____

Cosigner: _____ Phone: _____ Email: _____

COLDWELL BANKER RENTAL DIVISION (CBRD) CANCELLATION POLICY

I understand that the payment being made by me is entirely non-refundable except where: 1) the unit for which the applicant applies is unavailable (i.e. already rented). In which case, the applicant shall receive a full refund of his or her payment made to CBRD; or 2) the application is not accepted by the landlord. In which case, the applicant shall receive a full payment made to CBRD less the credit check/application fee. In all other instances the deposit will be retained in its entirety by CBRD and/or the landlord as liquidated damages, it being understood that such amount is a reasonable measure of damages for the unit being removed from the market and is not a penalty. Depending on the payment type, refund payments will be issued within 7 business days of request.

____/____/____/____/____/____ (Please initial) I have read and understood the above cancellation policy and accept its terms.

DEFAULT CLAUSE: The apartment approval process requires cooperation by the applicant. Failure by the applicant to (i) remit the balance of any partial payment owed to CBRD; (ii) provide any additional information or documentation required by the landlord or CBRD as part of the approval process; or (iii) consent to non-material differences between the listing agreement and the actual lease; or (iv) execute a written lease agreement or submit a security deposit (if required by landlord), shall constitute a default and shall result in forfeiture of all monies previously paid to CBRD. **Failure to comply with such requests within 72 hours shall be deemed a default.**

____/____/____/____/____/____ (Please initial) I have read and understand the above default policy and agree to abide by its terms.

AUTHORIZATION AND ACKNOWLEDGEMENT

Coldwell Banker Rental Division does its best to match properties and tenants, but does not accept or reject any application. The final review and determination regarding the suitability of the prospective tenant rests solely with the landlord. I authorize Coldwell Banker Rental Division and/or a representative of the landlord to check my credit, criminal record, employment and rental history and share that information with the property owner and/or representative of the landlord. Coldwell Banker Rental Division cannot be held responsible for any lease terms agreed between landlord and tenant or any errors or omissions on the lease.

1. _____

SIGNATURE DATE

2. _____

SIGNATURE DATE

3. _____

SIGNATURE DATE

4. _____

SIGNATURE DATE

5. _____

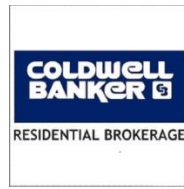
SIGNATURE DATE

6. _____

SIGNATURE DATE

CBRD does not discriminate in the sale, rentals and financing of dwellings on the basis of race, color, national origin, ancestry, religion, sex, age, familial status, marital status, parental status, handicap, disability, sexual orientation, transgender status, transsexual status, military status, unfavorable discharge from military service, source of income or any legally protected class.

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COLDWELL BANKER RESIDENTIAL BROKERAGE
5114 MAIN STREET, DOWNERS GROVE, IL 60515
C: 630-660-1292 O: 1-630-964-9696 F: 1-781-609-0654
W: <http://victorlopez.cbintouch.com> E: victor.lopez@cbexchange.com

MOVING CHECK LIST

SERVICE COMPANIES	PHONE NUMBER	WEBSITE
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UTILITY COMPANIES:

COMED	1-800-334-7661	https://www.comed.com/Pages/default.aspx
PEOPLES GAS	1-866-556-6001	https://myaccount.peoplesgasdelivery.com/Customer/JSP/myacct_signon.jsp?lg=null
NICOR GAS	1-888-642-6748	http://nicorgas.aglr.com/

WATER & GARBAGE:

CITY OF CHICAGO	1-312-744-4426	http://www.cityofchicago.org/city/en/depts/water/provdrs/cust_serv.html
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MOVERS:

UHAUL	1-800-789-3638	http://www.uhaul.com/
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STORAGE COMPANIES:

PUBLIC STORAGE	1-800-688-8057	http://www.publicstorage.com/illinois/self-storage-chicago-il/
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FURNITURE RENTAL COMPANIES:

CORT FURNITURE RENTAL	1-888-360-2678	http://www.cort.com/
BROOK FURNITURE RENTAL	1-877-285-7368	http://www.bfr.com/

CHANGE OF ADDRESS:

POST OFFICE	1-800-275-8777	https://tools.usps.com/go/POLocatorAction!input.action
DMV	1-800-252-8980	http://www.cyberdriveillinois.com/

CABLE/SATELITE/INTERNET SERVICE PROVIDERS:

COMCAST	1-800-934-6489	http://www.comcast.com/customer-home
DIRECT TV	1-877-500-7069	http://www.direct.tv/
ATT	1-800-288-2020	http://www.att.com/shop/internet/internet-service.html#fbid=G9wULVVejW9
RCN CHICAGO	1-800-RING-RCN	http://www.rcn.com/chicago/high-speed-internet

REALTOR / BROKER ASSOCIATE / NOTARY PUBLIC: BUY & SELL HOMES AND RENTAL SERVICES

VICTOR M. LOPEZ	1-630-660-1292	https://myplaceinchicago.com/
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Victor M. Lopez - Broker Associate / Realtor
Coldwell Banker 5114 Main Street, Downers Grove, IL 60515
 C: 630-660-1292 O: 630-964-9696 Email: vlopez023@yahoo.com
 Website: <http://www.myplaceinchicago.com>



FURNACE FILTER REPLACEMENT HISTORY CHART

UNIT ADDRESS: _____ CITY: _____ ST _____

MOVE IN DATE: _____ FURNACE FILTER DIMENSIONS L X W X H : _____

FILTER REPLACEMENT GENERAL INSTRUCTIONS:

AS A RULE OF THUMB - REPLACE YOUR FURNACE FILTER EVERY 3 MONTHS STARTING WITH THE FIRST DAY YOU MOVE INTO YOUR APARTMENT. ON YOUR SMART PHONE UNDER CALENDAR, INSERT FURNACE FILTER REPLACEMENT REMINDER DATES OR IN YOUR CONTACTS ON YOUR SMART PHONE YOU CAN WRITE AND SAVE FOR EXAMPLE YOU MOVE IN 1/20/2016 SO WRITE 'REPLACE FURNACE FILTER 1/20/2019 4/20/2019 7/20/2019 10/20/2019', EASY ENOUGH? SO YOU CAN SEARCH APPOINTMENT DATES LIKE 'VICTOR 3313 10:30AM 1/16/2019' EASILY BY SEARCHING THROUGH YOUR SMARTPHONE CONTACT LIST BY TYPING '1/16/2019'.

HOW MUCH DOES THE FURNACE FILTER COST: _____ PURCHASE DATE: _____

FOR RENTERS:

WHOSE RESPONSIBLE FOR REPLACING FURNACE FILTER? TENANT OR LANDLORD (CIRCLE ONE)

FURNACE SERVICE NAME: _____ PHONE: _____

1 _____	2 _____	3 _____
4 _____	5 _____	6 _____
7 _____	8 _____	9 _____
10 _____	11 _____	12 _____
13 _____	14 _____	16 _____
17 _____	18 _____	19 _____
20 _____	21 _____	22 _____
23 _____	24 _____	25 _____
26 _____	27 _____	28 _____
29 _____	30 _____	31 _____
32 _____	33 _____	34 _____

TAPE THIS CHART ONTO FURNACE OR WALL NEAR FURNACE TO KEEP TRACK OF FILTER REPLACEMENT HISTORY



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CUT OUT TABS BELOW INDIVIDUALLY AND TAPE ONTO SIDE OF RESPECTIVE BREAKERS ON ELECTRICAL PANEL IF NOT NUMBERED

CIRCUIT PANEL ID CHART

UNIT ADDRESS: _____

DATE: _____ ELECTRIC PANEL SIZE: 100 200 (CIRCLE ONE)

1 _____		2 _____
3 _____		4 _____
5 _____		6 _____
7 _____		8 _____
9 _____		10 _____
11 _____		12 _____
13 _____		14 _____
15 _____		16 _____
17 _____		18 _____
19 _____		20 _____
21 _____		22 _____
23 _____		24 _____
25 _____		26 _____
27 _____		28 _____
29 _____		30 _____
31 _____		32 _____
33 _____		34 _____
35 _____		36 _____
37 _____		38 _____
39 _____		40 _____

1	2
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5	6
7	8
9	10
11	12
13	14
15	16
17	18
19	20
21	22
23	24
25	26
27	28
29	30
31	32
33	34
35	36
37	38
39	40
41	42
43	44

CUT OUT ELECTRICAL CIRCUIT PANEL ID CHART ABOVE AND TAPE ONTO INSIDE ELECTRICAL PANEL COVER.