

Firefox has installed it's own PDF viewer that has trouble with these forms. If the form is not fillable on screen or looks strange, please switch to Internet Explorer or Chrome and it should work fine.

Application:

Fill out the rental application completely. Be sure to sign your name at the end of the rental application. There is a \$20 application fee for each application.

CHFA (Colorado Housing Finance Authority) Documents:

If you have further questions, there are audio instructions on our website with more information on completing these forms. Rmerrill.net/applications.html

The Burlington Hotel Lofts and 2033 Curtis Flats are income restricted and each has different income caps.

The Burlington Hotel Lofts: One person moving into the property must make a gross annual Income under \$39,000. Two persons must make a combined gross annual Income under \$44,580 at the time you move in. Your income can increase after move-in.

The Curtis Flats: One person moving into the property must make a gross annual income under \$32,500. Two persons must make a combined gross annual income under \$37,150 at the time you move-in. Your income can increase after move-in.

Income Verification:

Verification of Employment is the form we fax to your employer. Do Not fill out the top part of the form. You will only sign and date the box in the center of the form. There is a fax coversheet that you will need to fill out. Do NOT send this to your employer – we must fax or scan/e-mail it to them and they must fax or scan/e-mail back to us.

Certification of Income for Self-Employed Persons is the form you fill out if you are self-employed; make sure that you provide a copy of your most recent Federal Tax return or other requested additional documents.

Unemployed Resident Affidavit is the form you fill out if you are unemployed; make sure that you provide a copy of your most recent Federal Tax return or other requested additional documents.

Asset Verification:

Resident Statement of Assets is about your assets. Assets are investments that earn you money: stocks, bonds, trusts, 401 K's, IRA's, or property you own. Assets are not cars, computers, stereos, or work tools. Please list the cash value (column A) of each asset. Do not fill out the interest rate or annual income B or AB column.

Student Verification:

Non Student, Part-Time Student, or Full-Time Student: all applicants will need to fill out the ***Certification of Student Status*** form. If you are a Part Time Student or a Full-Time Student, you will need to fill out the top part of ***Verification of Student Status***. Your educational institution will fill out the bottom part of the form. You will need to provide a copy of your class schedule. Do NOT give this to your faculty advisor – we must fax or scan it to them and they must fax or scan back to us.

Return Paperwork:

Please return all paperwork to our offices located at:

2197 Arapahoe Street (22nd and Arapahoe at the Paris Hotel Courtyard).

You'll see "The Lobby" restaurant and patio. Walk toward the back of the courtyard and look for our office door marked 2197. If no one is in the office, put the paperwork through the mail slot.

Remember to include your \$20 application fee for each application.

R. MERRILL, INC.
2197 Arapahoe Street, Denver, Colorado 80205
Website: www.rmidenver.com
E-mail: rmidenver@ecentral.com
Office: 303-778-1100
Cell: 303-884-4140
Fax: 303-293-3161

Rental Application Form

R. Merrill, Inc. does business in accordance with the Federal Fair Housing Laws and does not discriminate against any person because of race, color, religion, sex, handicap, familial status, national origin or sexual orientation.

Rental units are not available on a first come, first served basis. In all cases, unless otherwise specified in writing, we are working for the owner and owe loyalty and fiduciary responsibility to the owner at all times. Applicants will be screened and units leased to those most qualified to meet the needs of each owner.

Name: _____

Best Phone # _____ E-mail: _____

Social Security #: _____ Date of Birth: _____

Pets: Cat ___ Other _____ Age ___ Name _____

We do not except dogs at any of our properties.

Previous Landlord References

Landlord: _____

Current Address: _____ Dates of Occupancy: _____

Roomates: Yes No

Owner/Manager: _____ Phone #: _____

Some Management Companies require us to send a fax for a tenant referral: Fax #: _____

Landlord Email address: _____

If you've occupied the above address for less than five years, please provide a second reference:

Landlord: _____

Previous Address: _____ Dates of Occupancy: _____

Roomates: Yes No

Owner/Manager: _____ Phone #: _____

Some Management Companies require us to send a fax for a tenant referral: Fax #: _____

Landlord email address: _____

Employment References

Present Employer: _____

Address: _____

Job Description: _____ Supervisor/Human Resource _____

Phone#: _____ FAX#: _____

Annual Income: _____ Dates of Employment: _____

Bank References

Bank: _____ Account #: _____

Phone #: _____

Emergency Contact Information

Nearest Relative: _____ Phone#: _____

Address: _____ Relationship: _____

Automobiles

Type/Make/Year: _____

License Plate: State and Number _____

Driver's License: State and Number _____

The undersigned represents that the above statements are true and authorized verification given. This is to inform you that as part of our procedure in processing your application, an investigate consumer report will be prepared. Receipt of a non-refundable application fee of \$20.00 is acknowledged.

I hereby allow Rental Services, Inc. to verify my employment and rental reference(s) and/or run a credit and criminal history check. I am aware that they may ask several questions regarding my background and I give them my permission to do so.

Agreed and Acknowledged by Applicant: _____ Date: _____

For Office use only:

Property: _____ Apt. No: _____ Rent per month \$ _____ Deposit \$ _____

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Property: _____ Apt. No: _____ Rent per month \$ _____ Deposit \$ _____

Property: _____ Apt. No: _____ Rent per month \$ _____ Deposit \$ _____

Notes: _____

Energy Winter Summer

Xcel

Parking



Verification of Employment

Employer: _____

Address: _____

Fax #: _____

RE: _____
Applicant/Resident Name

The above Applicant/Resident is applying to/participating in a housing program that requires verification of income. The individual has signed a release below giving you permission to supply us with information. The information provided will remain confidential. Please return the completed form to the address/fax below.

I certify that this verification has been sent directly to the employer and was not hand-carried by the applicant/tenant or any other interested party.

Signature of Owner/Agent Title Date

Owner/Agent's Address Owner/Agent's Fax Number

Consent to Release Information: My signature below authorizes verification of my employment information.

Applicant/Resident Signature

Date

Employer: Please fill out the information below as completely as possible.

Date of Hire: _____ Position: _____

Base Pay: \$ _____ per (check one) Year Month Week Hour Other: _____

If hourly, hours worked per week: _____

Year-to-Date Earnings: \$ _____ YTD Period: ____ / ____ / ____ thru ____ / ____ / ____

Overtime Hrs per week: _____ Overtime pay rate: \$ _____

Average No. of Shift Differential Hours per week: _____ Shift Differential Rate per Hour: \$ _____

Does this employee receive? (check all that apply) Bonuses Tips Commission None

Average bonus/tips/commission: \$ _____ per (check one) Year Month Week Hour

Are bonus/commissions Guaranteed? Yes No, Explain: _____

Date of Next Pay Increase (if known): _____ Amount of Next Pay Increase (if known): \$ _____

If employment is seasonal/periodic, please specify layoff periods: _____

Employer Comments: _____

WARNING: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful, false statements of misrepresentation to any Department or Agency of the U.S. as to any matter within its jurisdiction.

Signature of Employer Representative Title Date

Telephone #: _____

Fax/Scan Cover Sheet

To: _____

From: Jeffrey Hopper

Attn: _____

Pages including this sheet: _____

Subject: _____ Housing Documents

Fax: _____ or E-mail: _____

Telephone: _____

Employer:

Important Please Read Carefully

Your employee _____ has applied for a rental unit in our building. In order to qualify he/she must have a third-party verification of income.

CHFA housing is a great opportunity to provide affordable housing to employee' in the Denver metro area. We hope that all employers recognized that the benefit of have employee's living and work in the Denver area in affordable and safe environments is a bonus for your business. **Please take the time to fill out all forms correctly.** This housing is in high demand! If forms are not filled out correctly or returned in a timely manner (**2 days**) it will jeopardize your employee from obtaining this housing opportunity.

Employer:

- Please answer all the questions in "The Employment Verification Form" **and be exact with dollar amounts and numbers. Do not put varies or depends, if you can't put an exact dollar amount put NA.**
- YTD (Year To Date) Income: **You must fill out the salary amount and the YTD income.** YTD is from January 1st of the current year until present or the last pay period.
- If there are items that do not pertain to the way he/she receives income, **please put NA in the blank.**
- Computer signatures and typed dates are not valid. **You must hand sign and date.**

**Thank you / Fax : 303- 293-3161 or Scan and e-mail to:
rmidenver@ecentral.com**



certification of income for self-employed persons

Head of Household Name	Unit Number
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I am a self-employed individual. I am providing the following information and documentation to verify my household income. I certify that the information shown on the attached required items is true and complete to the best of my knowledge.

Based on my previous and planned self-employment activities, I anticipate my income for the next 12 months will be \$_____.

Please choose and complete one of the following options.

- I have filed federal income tax returns as a self-employed person. Attached are the following required documents:
 - Copy of my 20 ____ federal income tax returns as filed with the IRS
 - Year-to-date profit and loss statement
 - Business plan explaining business type/nature, frequency of work, frequency of payment, and payment amounts

- I have not yet filed or am not required to file federal income tax returns as a self-employed person. Attached are the following required documents:
 - Annual profit and loss statement for the previous year
 - Copies of payments/checks received from customers or ledger cards, if available
 - Year-to-date profit and loss statement
 - Business plan explaining business type/nature, frequency of work, frequency of payment, and payment amounts

Warning: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful, false statements of misrepresentation to any Department or Agency of the U.S. as to any matter within its jurisdiction.

Applicant/Resident Name _____ Date _____

Signature of Applicant/Resident _____



unemployed resident affidavit

Resident Name	Unit Number
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I certify that I am currently unemployed. My status for the upcoming 12-month period is *(please choose one of the following)*:

- I anticipate becoming employed within the next 12 months. Based on my past work experience, skills, and income history as reflected in my federal income tax return for the most recent tax year (copy must be attached) or other relevant documentation (must be attached), I expect to earn \$ _____ per year when I become employed.
- I anticipate becoming employed within the next 12 months. I do not have a history of employment, but I expect to earn \$ _____ per year when I become employed.
- I do not anticipate becoming employed within the next twelve months.

By my signature, I certify the above information is true and correct.

Warning: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful, false statements of misrepresentation to any Department or Agency of the U.S. as to any matter within its jurisdiction.

Applicant/Resident Signature

Date



resident statement of assets

Instructions: Please complete **both** Sections 1 and 2. All adults, except married couples, must complete separate forms. Include any assets you own or co-own. Assets include, but are not limited to, checking or savings accounts, real estate, stocks, bonds, and retirement accounts.

Resident Name	Unit Number
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section 1 please choose one of the following

- I/We do not have any assets at this time.
- I/We have assets. My/our assets are listed below. [Please note: Certain funds (e.g., retirement, pensions, trusts) may or may not be fully accessible to you. Include only those amounts which are accessible.]

source	(a) cash value*	(b) interest rate	(a x b) annual income	source	(a) cash value*	(b) interest rate	(a x b) annual income
Savings Account	\$	%	\$	Checking Account	\$	%	\$
Cash On Hand	\$	%	\$	Safety Deposit Box	\$	%	\$
Certificates of Deposit	\$	%	\$	Money Market Funds	\$	%	\$
Stocks	\$	%	\$	Bonds	\$	%	\$
IRA Accounts	\$	%	\$	401k Accounts	\$	%	\$
Keogh Accounts	\$	%	\$	Trust Funds	\$	%	\$
Equity in Real Estate	\$	%	\$	Land Contracts	\$	%	\$
Lump Sum Receipts	\$	%	\$	Capital Investments	\$	%	\$

Value of Life Insurance Policies (excluding Term Life)*	\$
Additional Retirement/Pension Funds (not named above)*	\$
Value of Personal Property Held for Investment	\$
Other Assets (not included above)	\$

* Cash value is defined as market value less the cost of converting the asset to cash. Costs may include broker's fees, settlement costs, outstanding loans, early withdrawal penalties, etc.

** Personal property held for investment purposes may include, but is not limited to, gem or coin collections, art, or antique cars. Do not include items such as household furniture, daily-use autos, clothing, active business assets, or special equipment for use by the disabled.

section 2 you must choose one of the following

- Within the past two years, I/we have sold or given away assets (including cash, real estate, etc.) for more than \$1,000 below their fair market value (FMV). These assets are included above and are equal to a total of \$ _____ (the value to include for each asset equals the difference between FMV and the amount actually received for the asset).
- I/We have not sold or given away assets (including cash, real estate, etc.) for less than the fair market value during the past two years.

Under penalty of perjury, I/we certify that the information presented in this certification is true and accurate to the best of my/our knowledge. The undersigned further understand(s) that providing false representations herein constitutes an act of fraud. False, misleading, or incomplete information may result in the termination of a lease agreement.

Applicant/Resident Signature _____ Date _____

Applicant/Resident Signature _____ Date _____

Payment of Security Deposit & First Months Rent

No Personal Checks!

All payments towards security deposit and first month's rent must be either:

Money Order

Cashier's Check

No personal checks are accepted. However, payments for the second month and thereafter may be in the form of a personal check, if desired.

Money Orders and Cashier's Checks must be made out to the property to which you will be renting:

Burlington Hotel.....made out to.....Burlington Hotel Ltd.

Curtis Street Apts..... made out to.....Curtis Street Ltd.

Do Not Make Out Any Payments to R. Merrill, Inc.