



Alltrade Property Management Rental Application – Tax Credit Properties

Thank you for your interest in renting from Alltrade! We so look forward to providing you with quality affordable housing. Please see below for a few important details about our standard tax credit application process.

The following steps are required before your application can be considered complete and processed:

1. Applicant(s) provides Alltrade with a copy of **(6) six consecutive months of bank statements**
2. Applicant(s) provides Alltrade with **(6) six consecutive statements of any source of income** (i.e. Social Security, SSI, Check Stubs)
3. Applicant(s) provides Alltrade with **picture identification for all persons over the age of 18**
4. Applicant(s) provides Alltrade with **social security card(s) for all Household members**
5. Applicant(s) **signs and submits** application
6. Applicant(s) **pays the non-refundable application fee** (\$15 per applicant)
 - a. Applicant(s) may pay applicant fee in the form of a money order or certified funds made out to the legal property owner.
 - a. Applicant(s) may pay application fee over the phone or in person at an Alltrade office by credit card or ACH. Please note the ACH payments are free to the applicant and have instant approval while credit card payments may have a 3% processing fee and delay the screening process up to 72 hours to ensure funds clear.

If you have any questions at all about the application process, please contact the Alltrade corporate office at 502-562-1985 and an Alltrade team member will be happy to assist you.

Please note that you can also apply online at <https://alltradeproperties.com>

APPLICANT PERSONAL INFORMATION (all fields are required):

Property/Unit Applying for: _____

Apartment size preference: _____ **How did you hear about us?** _____

Were you referred to Alltrade by a current resident or community agency? YES NO

If yes, please list the name of the person or agency that referred you: _____

First Name: _____ **Middle:** _____ **Last:** _____

Gender: Male Female Genderqueer/non-binary Do not wish to disclose

Current Street Address (city, state, zip): _____

Marital Status: Single Married Divorced Separated

Have you ever used another name? YES NO If yes, please indicate name: _____

Date of Birth (mm/dd/yyyy): _____ **Social Security Number:** _____

Mobile Phone: _____ **Home Phone:** _____ **Work Phone:** _____

Email: _____ **Driver's License #:** _____

HOUSEHOLD MEMBER INFORMATION

Do you have a co-applicant, occupancy, or cosigner/guarantor to add to this application? YES NO

Anticipated change in family/occupancy size? YES NO

Anticipated change in number of students? YES NO

If **no**, please move to the "Anticipated Income" section of the application.

If **yes**, please provide the requested information for anyone else that will occupy the unit with you. Anyone over the age of 18 should be classified as a "Co-Applicant" and must be screened, and anyone under the age of 18 should be classified as an "Occupant" in the "Applicant Type" field.

Other Applicant 1

Please add additional applicant, occupant, or co-signer information below. Please write N/A if not applicable.

Applicant Type/Relation to Applicant: Co-Applicant (over 18) Occupant (under 18) Co-signer/Guarantor

First Name: _____ **Middle:** _____ **Last:** _____

Date of Birth (mm/dd/yyyy): _____ **Social Security Number:** _____

Gender: Male Female Genderqueer/non-binary Do not wish to disclose

Full-Time Student? YES NO **Primary Phone:** _____

Email: _____ **Driver's License #:** _____

Other Applicant 2

Please add additional applicant, occupant, or co-signer information below. Please write N/A if not applicable.

Applicant Type/Relation to Applicant: Co-Applicant (over 18) Occupant (under 18) Co-signer/Guarantor

First Name: _____ **Middle:** _____ **Last:** _____

Date of Birth (mm/dd/yyyy): _____ **Social Security Number:** _____

Gender: Male Female Genderqueer/non-binary Do not wish to disclose

Full-Time Student? YES NO **Primary Phone:** _____

Email: _____ **Driver's License #:** _____

Other Applicant 3

Please add additional applicant, occupant, or co-signer information below. Please write N/A if not applicable.

Applicant Type/Relation to Applicant: Co-Applicant (over 18) Occupant (under 18) Co-signer/Guarantor

First Name: _____ **Middle:** _____ **Last:** _____

Date of Birth (mm/dd/yyyy): _____ **Social Security Number:** _____
Gender: Male Female Genderqueer/non-binary Do not wish to disclose
Full-Time Student? YES NO Primary Phone: _____
Email: _____ **Driver's License #:** _____

Other Applicant 4

Please add additional applicant, occupant, or co-signer information below. Please write N/A if not applicable.

Applicant Type/Relation to Applicant: Co-Applicant (over 18) Occupant (under 18) Co-signer/Guarantor

First Name: _____ **Middle:** _____ **Last:** _____

Date of Birth (mm/dd/yyyy): _____ **Social Security Number:** _____

Gender: Male Female Genderqueer/non-binary Do not wish to disclose

Full-Time Student? YES NO Primary Phone: _____

Email: _____ **Driver's License #:** _____

Other Applicant 5

Please add additional applicant, occupant, or co-signer information below. Please write N/A if not applicable.

Applicant Type/Relation to Applicant: Co-Applicant (over 18) Occupant (under 18) Co-signer/Guarantor

First Name: _____ **Middle:** _____ **Last:** _____

Date of Birth (mm/dd/yyyy): _____ **Social Security Number:** _____

Gender: Male Female Genderqueer/non-binary Do not wish to disclose

Full-Time Student? YES NO Primary Phone: _____

Email: _____ **Driver's License #:** _____

ANTICIPATED INCOME

Please detail the present employment and other income received by all household members. Please write N/A if a particular question is not applicable.

Applicant Current Employment/Income

Source of Income/Employer: _____ **Current Occupation/Position:** _____

Employer Address (city, state, zip): _____ **Start** _____ **Date:** _____



Monthly Gross Income: _____ **Monthly** **Net** **Income:**

Supervisor/Contact: _____ **Contact** **Phone:**

*Please remember to submit your (3) most current paystubs and/or other income documents alongside this application.

Other Applicant Employment/Income

Does any member of the household have no income? YES NO
If yes, list adult member(s) with no income:

Does anyone help you pay your bills? YES NO
If yes, please list source: _____

Do any other household members/co-applicants have income to report? YES NO
If yes, please complete information below. If no, please move to "Additional Income Information."

Other Applicant 1

Source of Income/Employer: _____ **Current Occupation/Position:** _____
Employer Address (city, state, zip): _____ **Start** **Date:**

Monthly Gross Income: _____ **Monthly** **Net** **Income:**

Supervisor/Contact: _____ **Contact** **Phone:**

*Please remember to submit your (3) most current paystubs and/or other income documents alongside this application.

Other Applicant 2

Source of Income/Employer: _____ **Current Occupation/Position:** _____
Employer Address (city, state, zip): _____ **Start** **Date:**

Monthly Gross Income: _____ **Monthly** **Net** **Income:**

Supervisor/Contact: _____ **Contact** **Phone:**

*Please remember to submit your (3) most current paystubs and/or other income documents alongside this application.



Other Applicant 3

Source of Income/Employer: _____ Current Occupation/Position: _____

Employer Address (city, state, zip): _____ Start _____ Date: _____

Monthly Gross Income: _____ Monthly _____ Net _____ Income: _____

Supervisor/Contact: _____ Contact _____ Phone: _____

*Please remember to submit your (3) most current paystubs and/or other income documents alongside this application.

Additional Income Information

Please answer each of the questions below. Write N/A if not applicable.

Are you entitled to child support benefits? YES NO

If yes, do you receive child support benefits? YES NO If yes, what monthly benefit? _____

If no, what attempts are you making to collect the entitled child support benefits (please explain)? _____

Other sources of income not listed above (e.g. Social Security, alimony, stipend, etc)?

Please list contact, address and phone number for any sources listed above:

Do you have any other income not listed? YES NO

If yes, please list source: _____

ASSETS

Asset Disclosure

Has any member of your household sold or otherwise disposed of any asset during the past two years? YES NO

Do you have any assets to disclose? YES NO (if yes, please complete information requested below)

Asset 1

Account Number: _____ Value: _____

Asset Description (if a property, please disclose location): _____



Asset 2

Account Number: _____ Value: _____

Asset Description (if a property, please disclose location): _____

CREDIT REFERENCES

Please provide (3) three credit references (credit cards, schools loans, car payment, mortgage payments, etc) below.

Credit Reference 1

Account Number: _____ Company Name (Creditor): _____

Monthly Payment: _____ Current Balance: _____

Judgements/Bankruptcy? YES NO If yes, explain: _____

Credit Reference 3

Account Number: _____ Company Name (Creditor): _____

Monthly Payment: _____ Current Balance: _____

Judgements/Bankruptcy? YES NO If yes, explain: _____

Credit Reference 2

Account Number: _____ Company Name (Creditor): _____

Monthly Payment: _____ Current Balance: _____

Judgements/Bankruptcy? YES NO If yes, explain: _____



BANK REFERENCES

Please provide (2) two bank references.

Bank Reference 1

Bank Name: _____

Bank Address: _____

Type of Account: CHECKING SAVINGS

Account Number: _____

Average Balance: _____

Actual Interest Earned: _____

Bank Reference 2

Bank Name: _____

Bank Address: _____

Type of Account: CHECKING SAVINGS

Account Number: _____

Average Balance: _____

Actual Interest Earned: _____

RESIDENCE HISTORY OF CURRENT AND PREVIOUS LANDLORD(S)

Current Residence

Current Street Address (city, state, zip): _____

Move in Date: _____ Expected Move Out: _____ Landlord Name: _____

Landlord Phone: _____ Landlord Address (city, state, zip): _____

Do we have permission to contact this landlord? YES NO

If no, why? _____

Monthly Rent Amount: _____ Is present rent up to date? YES NO

Monthly Utility Amount: _____ Are all utility payments up to date? YES NO

Length of residency: _____ Reason for leaving: _____

Previous Residence

Current Street Address (city, state, zip): _____

Move in Date: _____ Move Out Date: _____ Landlord Name: _____



Landlord Phone: _____ Landlord Address (city, state, zip): _____

Monthly Rent Amount: _____ Reason for leaving: _____

Previous Residence

Current Street Address (city, state, zip): _____

Move in Date: _____ Move Out Date: _____ Landlord Name: _____

Landlord Phone: _____ Landlord Address (city, state, zip): _____

Monthly Rent Amount: _____ Reason for leaving: _____

PETS

The standard Alltrade pet policy allows a maximum of (2) two pets per unit. A **\$300 refundable pet fee per pet** is required at move in and there is no monthly pet rent charge. Please note that some properties do deviate from this standard policy or *may not allow pets at all*.

If you have a pet or pets, please fill out the information requested below.

Pet #1

Type: _____ Breed: _____ Size: _____

Color: _____

Pet #2

Type: _____ Breed: _____ Size: _____

Color: _____

OTHER INFORMATION

Vehicle Information (including company cars, motorcycles, etc)

State: _____ Make & Model: _____ Year: _____

Color: _____ License Plate #: _____

State: _____ Make & Model: _____ Year: _____

Color: _____ License Plate #: _____



State: _____ Make & Model: _____ Year: _____

Color: _____ License Plate #: _____

Emergency Contact

In case of emergency, please notify:

Contact Name: _____ Relation to Applicant: _____

Street Address (city, state, zip): _____

Home Phone: _____ Mobile Phone: _____

Character Reference #1 (no relation to applicants)

Reference Name: _____ Reference Phone: _____

Reference Email: _____ How long have you known this person? _____

How do you know this person? _____

Character Reference #2 (no relation to applicants)

Reference Name: _____ Reference Phone: _____

Reference Email: _____ How long have you known this person? _____

How do you know this person? _____

Special Needs

Does anyone in this household have special needs? YES NO

Are special living accommodations required? YES NO

FINANCIAL INFORMATION

Please explain any "Yes" answer in the fields provided.

Has any signer ever been sued for bills? YES NO

If yes, please provide name(s) and details: _____

Has any signer ever been bankrupt? YES NO

If yes, please provide name(s) and details: _____



Has any signer ever broken a lease? YES NO

If yes, please provide name(s) and details: _____

Has any signer ever been sued for eviction or had an eviction filed against them? YES NO

If yes, please provide name(s) and details: _____

Has any signer ever been guilty of a felony? YES NO

If yes, please provide name(s) and details: _____



I/we authorize Alltrade Service Solutions, LLC credit reports and background checks with my rental application. I understand that my credit report, background checks, and the information therein shall be used in compliance with State Law or Federal Law or Fair Credit Report Act or Equal Opportunity Law or appropriate regulations. I also understand that I have the right to obtain a copy of my own credit report and background check and can dispute any information.

I/we, _____, hereby authorized, without any reservation, any information bureau contacted by Alltrade Property Management to obtain the above credit information.

X _____
Applicant Signature Date

X _____
Applicant Signature Date

X _____
Applicant Signature Date

X _____
Applicant Signature Date

PLEASE FORWARD ALL INFORMATION TO:

The Leasing Office at the Property you are applying for

OR

Alltrade Property Management Headquarters

710 Barret Avenue Louisville, KY 40204

Phone: 502-562-1985 **Email:** info@alltradeproperties.com

