



Thank You for Selecting Regency Park

For

Your Home

**Please Take a Few Minutes to Read Over the
Instructions for Completing Your Application.**

**This should help you with any
questions that you may have about our forms.**

Should you need assistance, please feel free to write or

Call us at (864) 943-1333...



Instructions for Completing the Co-Signor Application for Residency

Regency Park Disclosures Form: All persons applying for an apartment must read the Regency Park Disclosures Form and sign that you understand its contents.

Qualification Standards: Please read and sign the form, and return with the application package. (Student applicants should sign as well.)

Application for Residency Page 1... All sections must be completed. If you are applying for an apartment for student housing as a **co-signor for your student**, both you and your student need to be listed on the Application. (Co-Signor should be listed as Applicant, Student should be listed as Student in Section I. You should be listed as the Head of Household in Section II and Your student(s) should be listed as an occupant(s). *Other non-related student non-related roommates will appear on their separate applications, so it is not necessary to list all students unless they are related.*

Application for Residency Page 2... Complete Section V, VI, VII and Read the paragraph above the signature lines in Section VIII. Please initial to the left of the paragraph that you read and understand the paragraph, and sign the application as Applicant. All Co-Signors and Applicants must sign this section.

Rental Verification Form... If you are currently renting or have rented in the last 10 years, please complete the TOP section of the form. We must have contact information to your landlord or previous landlord. Do not complete the BOTTOM section. If you own your home or are buying it, please write at the top of the page that you "own my home" and sign the form where indicated near the middle of the page. Where applicable, a Student should complete the Rental Verification Form as well. If coming from home, write lived "Live with Parents" at the top of the Form. The form must be signed and returned with the application package.

Employment Verification... Please complete the top section of the form and be sure to include phone and fax numbers. We cannot complete your application without phone and fax numbers. **The form must be signed by you in the top section.** Where Applicable, Students should complete an Employment Verification Form. If unemployed, list "Student" as occupation and sign in the top section.

SLED Forms... This form must be completed for the Applicant and Student and included in your application package. **Do not process** this form with SLED as the fees for the background check are included in your application fee.

Letter of Responsibility... The form must be completed by the application to include the approximate amount of support you will be giving your student or relative. **The signature on this form must be witnessed by an active notary public unless it is signed in the presence of one of our office staff members.**

Security Deposit/Binder Agreement... Upon approval of your application, you will need to pay a Binder /Security Deposit. The Security Deposit / Binder agreement must be signed and submitted along with the signed agreement.

Please either send the completed package to our office via fax, US mail, or you may scan and e-mail the package to info@regencyparkgreenwood.com . Please do not return the Instruction Sheets with your package.

Please do not hesitate to call or write us with any questions that you may have.

Thank you for considering Regency Park for your housing needs!



Regency Park Apartments Community Disclosures

Regency Park Management's Goal is for our Resident's to have a Positive Living Experience at Regency Park. Thus, we strive to maintain a Clean, Safe and Quiet Environment for all our Residents; therefore, we have adopted certain policies and guidelines to help insure this endeavor.

Regency Park has adopted the Policy of a "Non-Smoking Community". This means there shall be no smoking at any time by a Resident or Guest in the Resident's apartment or at any place within the property boundaries of the Regency Park Community. THIS POLICY APPLIES TO ALL RESIDENTS AND THEIR GUEST AND WILL BE STRICTLY ENFORCED. Any infraction of this policy will lead to eviction proceedings as stated in Section 6 of the Lease.

Regency Park's Pet Policy allows pets in "Pet Friendly Apartments" only. All pets must be approved by the Regency Park Management prior to being admitted. Pet sitting of un-authorized pets and pet visitation from unauthorized pets is strictly prohibited. Pets of Guest are not allowed under any circumstances. "Pet Damage Deposits" and "Pet Fees" must be paid in full prior to any pet being permitted in an apartment. "Pet Fees" are Non-Refundable when paid whether or not a pet actually enters the apartment. Pets may not be kenneled, tied or staked outdoors on the property at any time.

All Residents will pay a Carpet Cleaning Fee based on the size of the apartment upon vacating the apartment. This charge will be paid from the Resident's Security Deposit. The fee currently ranges from \$85 to \$105 based on the size of the apartment and is subject to change at any time.

Proof of Insurance (Renter's Insurance) must be provided to the Landlord no later than move-in. Each Resident is required to obtain insurance on personal property for protection from events that could damage Resident's personal property. Such insurance shall name Regency Park Apartments as "Additional Insured", and provide "Replacement Value Coverage" and a minimum of \$300,000 Liability Insurance Limit. Each Resident agrees to comply in all respects with the requirements of the Landlord's present or future insurance carrier and not to permit anything to be done at or within premises which shall cause cancellation of or increase in the current rate of insurance thereon.

The Pool Rules and "Waiver of Liability Agreement" must be signed in order for Pool Privileges to be granted. Residents and their Guests will not be allowed to use the pool until the signed Agreements have been signed.

Regency Park recognizes "Quiet Hours" from 10PM until 8AM. No house chores, exercising or socializing which could cause a disturbance to surrounding neighbors is allowed during these hours. Residents and their Guest should not infringe on a Neighbor's right to peaceful enjoyment of their lease premises at any time.

Exercise equipment such as treadmills, stationery bicycles, etc. which could cause a disturbance to surrounding Residents or damage to the buildings structure is not allowed.

Damages from "Offensive and Lingering Odors" are not considered "normal wear and tear" and the Resident will be charged for the remediation of this type of damage.

Regency Park maintains a "Zero Tolerance Policy" for the use of any illegal drug or criminal activity on or off the premises of Regency Park. Any infraction of this Agreement will result in immediate eviction of the resident.

The policies and guidelines stated above reflect a portion of the Frequently Asked Questions concerning the "Regency Park Lease Rules and Regulations". The entire List of Rules and Regulations and other Lease Addendums are made a part of the Lease at Lease signing.

Applicant Signature

Date

Applicant Signature

Date



PERFORMANCE INVESTMENTS OF THE CAROLINAS LP

Regency Park Apartments Greenwood, SC

APPLICATION FOR RESIDENCY

I. APPLICANT INFORMATION

NAME (APPLICANT/ CO-SIGNOR) FIRST MIDDLE LAST PHONE # E-MAIL

NAME (SPOUSE/ STUDENT) FIRST MIDDLE LAST PHONE # E-MAIL

PRESENT ADDRESS [] OWN [] RENT CITY STATE/ZIP MONTHLY RENT/ MORTGAGE

PREVIOUS ADDRESS (if less than 3 years at present address) CITY STATE/ZIP

PREVIOUS LANDLORD ADDRESS PHONE # HOW LONG AT PREVIOUS ADDRESS?

II. HOUSEHOLD COMPOSITION (ALL PERSONS WHO WILL OCCUPY APARTMENT)

Table with 7 columns: NAME, SEX M/F, AGE, DOB, Full-Time Student YES/NO, RELATIONSHIP TO, SOCIAL SECURITY NUMBER. Includes 'Head of Household' label.

NOTE: A student is a person carrying a subject load considered full-time by the educational institution being attended, or will be a full-time student at an educational institution with regular facilities and students other than correspondence schools during five (5) months of the certification year.

1a. Are all persons listed as Applicants or Occupants above Citizens of the United States? Yes ___ No ___

If no, Please Explain _____

1b. Are any of the students listed above eligible to file a joint Federal Tax Return? Yes ___ No ___

If yes, NAME (S) _____

1c. Are any of the students listed above enrolled in government sponsored job training program? Yes ___ No ___

If yes, list name & program: _____

2. Do you or any family members own a car? Yes ___ No ___

MODEL/YEAR TAG# MODEL/YEAR TAG # MODEL/YEAR TAG#

DRIVER'S LICENSE NUMBER DRIVER'S LICENSE NUMBER DRIVER'S LICENSE NUMBER

III. EMPLOYMENT INCOME: List all full-time or part-time employment, including self employment of all household members and the anticipated income from each source of employment during the next 12 months

Table with 7 columns: NAME, EMPLOYER/ADDRESS/CITY/STATE, ANNUAL INCOME, DATE OF EMPLOYMENT, POSITION, PHONE #, SUPERVISOR

IV. OTHER INCOME List all other types of income such as Alimony, Child Support, Social Security, Pensions, Disability Compensation, Unemployment Compensation, Welfare, SSI or Recurring Monetary Contributions, Gifts Regularly Received, Inheritance, Trust Income. Educational Scholarships and Loans may be listed as student income.

Do not include Reimbursable Medical Expenses, Foster ChildCare Payments, Income from the Employment of Children under the age of 18.

Table with 3 columns: NAME, TYPE OF INCOME, ANNUAL AMOUNT

(Rev 5/17)

V. PERSONAL REFERENCE:

IN CASE OF EMERGENCY, PLEASE NOTIFY:

NAME _____
ADDRESS _____
PHONE # _____

NAME _____
ADDRESS _____
PHONE # _____

VI. SMOKING

Does Applicant(s) or anyone listed as a Resident/Head of Household or Occupant/Student in Section II of this Application Smoke any Tobacco products? YES _____ NO _____

VII. PETS

List below any Animals that you will bring to the apartment. IF NONE, STATE HERE _____.

I understand that no pets of any kind shall be permitted in the leased premises without Management's prior written consent and payment of appropriate pet fee. I understand that all applicants listed as Resident on the lease must approve the admission of any pet. Furthermore, I understand that the management may approve or disapprove any pet or pet combination for residency and that the required pet damage deposits may vary.

Name of pet _____ Description _____ Breed _____ Age _____

Name of pet _____ Description _____ Breed _____ Age _____

VIII. LEASE PROVISIONS

A NON-REFUNDABLE APPLICATION PROCESSING FEE \$75 is accepted to cover credit reports, background reports and other processing costs. A deposit of \$ _____ is accepted and applied toward security deposit as required by the lease. Deposit is refunded within 30 days if application is not accepted. We will withdraw your apartment from the market and not offer it to others. For this reason, if you fail to sign a lease and take occupancy on date specified below after application is accepted, your deposit will be forfeited.

Building No. _____ Apartment No. _____ Rental Rate _____ Lease Term _____

Today's Date _____ Lease Begins _____ Concession Amount _____ Move In Date _____

VIII. APPLICANT CERTIFICATION

APPLICANT(S) MUST READ, UNDERSTAND, AND SIGN THE STATEMENT BELOW

I certify that all of the information above about my family and me is true, complete and accurate and hereby authorize Performance Investments of the Carolinas aka Regency Park Apartments, its officers and authorized employees to perform any investigation of my creditworthiness and criminal records as they see fit as long as I am a resident of Regency Park Apartments or are indebted to Regency Park or Performance Investments of the Carolinas. All persons or firms including credit reporting agencies and criminal background reporting agencies may freely give any requested information concerning me and I hereby waive all right of action for any consequences resulting from such information. I also understand that ALL CHANGES to the INCOME and ANY member of the household as well as ANY CHANGES in FAMILY MEMBERS must be reported to Management in writing IMMEDIATELY. If any of the information is found to be incorrect, the landlord at his sole discretion may cancel or terminate the lease contract and retain all monies as liquidated damages.

APPLICANT _____ DATE _____

APPLICANT _____ DATE _____

LEASING AGENT _____ DATE _____

APPLICANT _____ DATE _____

X Application Approval / Declination

DATE _____

APPROVED _____ SPECIAL STIPULATION _____

DISAPPROVED _____

IF THIS APPLICATION WAS DISAPPROVED, WHAT WAS THE BASIS FOR REFUSAL?

- _____ UNFAVORABLE CREDIT REPORT
- _____ UNFAVORABLE REPORT FROM PREVIOUS LANDLORD
- _____ UNFAVORABLE EMPLOYMENT REFERENCES
- _____ INCORRECT INFORMATION SUBMITTED ON APPLICATION

_____ NUMBER OR SIZE OF PETS
_____ OTHER (SPECIFY) _____

MANAGER'S SIGNATURE _____



REGENCY PARK APARTMENTS

120 Edinborough Circle

Greenwood, SC 29649

Phone: (864) 943-1333

Fax: (864) 943-5187

Verification of Employment

Applicant's Name: _____ SS#: _____

Address: _____
(Street) (City) (State) (Zip)

Employer/Company: _____

Phone Number: _____ Fax Number: _____

By signing below, I authorize Performance Investments of the Carolinas LP DBA Regency Park Apartments to verify the requested information regarding my income and salary.

Signature of Applicant: _____ Date: _____

To be completed by Employer only - will not be accepted otherwise.

Date of employment: _____ to _____

Probability of continued-employment: _____

Income/Salary Info: \$ _____/hr. averaging _____ hrs./wk

\$ _____/month

\$ _____/year

Information provided by: _____
(Please sign and print)

Title/Position: _____ Date signed: _____

Thank you in advance for your cooperation.
Regency Park Management



(Rev 12/17)

Regency Park Apartments
120 Edinborough Circle, Greenwood, SC 29649
RENTAL VERIFICATION FORM

CURRENT/PREVIOUS LANDLORD _____

FAX NUMBER _____ PHONE NUMBER _____

LOCATION (City, State) _____

The Resident /Previous Resident listed below is applying for an apartment at Regency Park Apartments. We would appreciate your cooperation in furnishing the information listed below. Please complete, sign and fax this inquiry to (864) 943-5187 or call (864) 943-1333 or E-Mail to leasing@regencyparkgreenwood.com. Thank you for your immediate attention.

Sincerely,
Regency Park Apartments

APPLICANTS NAME: _____

ADDRESS AT RENTAL COMMUNITY: _____

My signature below authorizes you to release the information requested by Regency Park Management.

APPLICANT SIGNATURE: _____ DATE: _____

DATES THE RESIDENT HAS LIVED /LIVED AT YOUR COMMUNITY From _____ To _____
MONTHLY RENT PAYMENT? _____

WAS THE RESIDENT EVER LATE ON RENT PAYMENTS? YES NO # of times _____

ANY NSF CHECKS OR UNPAID BALANCES? YES NO # of times _____

WAS THE DWELLING UNIT KEPT CLEAN AND FREE FROM INSECT INFESTATION INCLUDING BEDBUGS?

YES NO

Please explain if No _____

WAS THE DWELLING UNIT RETURNED FREE OF ANY SMOKE OR OTHER OFFENSIVE OR LINGERING ODORS? YES NO

Please Explain if No _____

WOULD YOU RE-LEASE TO THE RESIDENT? YES NO

Please explain if NO _____

WAS PROPER NOTICE GIVEN? YES NO

Please explain if NO _____

ANY NOISE COMPLAINTS? YES NO

Please explain if YES _____

DO /DID THE RESIDENT OR OCCUPANTS HAVE ANY PETS? YES NO

Please provide any additional information that we should be aware of _____

Information provided by: _____ Date _____



South Carolina
Law Enforcement Division

P.O. Box 21398
Columbia, South Carolina
29221-1398

Henry D. McMaster, Governor

Mark A. Keel, Chief

Tel: (803) 737-9000

CRIMINAL RECORD CHECK

(Please print your completed form and submit to SLED. You may want to print a copy for your records.)

FULL NAME (with middle name): _____

AKA and/or MAIDEN NAMES: _____

DOB: _____ SSN: _____

(Federal law permits governmental agencies to require a social security number in order to conduct official business; however, private entities may only obtain social security numbers if given voluntarily).

(A self addressed stamped envelope is required for the return of background

CHARITABLE ORGANIZATIONS AND SCHOOL DISTRICTS ONLY

NAME OF ORGANIZATION: _____

VERIFICATION NUMBER (as provided by SLED for online checks): _____

SCHOOL DISTRICTS ONLY - POSITION APPLIED FOR: _____

(A self addressed stamped envelope is required for the return of background check)

PLEASE NOTE:

The fee is twenty-five dollars (\$25) unless you are a charitable organization approved for a fee of eight dollars (\$8). A charitable organization must include its name and User ID number or the request may not be processed. Payment must be business check, certified/cashier's check or money order payable to SLED. PERSONAL CHECKS and CASH WILL NOT BE ACCEPTED. This report contains records of arrests and convictions made by state/local agencies in South Carolina only. Alteration of a completed criminal record check may subject a person to criminal prosecution. A completed criminal records check should not be accepted unless it bears an original SLED stamp.

***SLED RECORDS SECTION HAS BEEN CLOSED TO THE PUBLIC SINCE DECEMBER 15, 2008.**

(CJ-022) Revised 09/25/15



An Accredited Law Enforcement Agency





LETTER OF RESPONSIBILITY
(To be used only by a Parent of Guardian of the Applicant)

As an inducement for *REGENCY PARK APARTMENT HOMES* to lease apartment # _____ to _____ the undersigned agrees to accept full responsibility in the event the above mentioned Resident(s) does not fulfill his/her lease agreement on said apartment, and does not pay to Management all monies due under the terms of the lease agreement. I will promptly, upon notification of Management, their Agents, Assigns or Successors, pay the full amount owed within ten (10) days of notification. Said notice shall be deemed to be received if addressed as shown below and deposited in the U.S. main with adequate postage thereon.

The lease agreement between Resident and Management is incorporated as part of this letter of responsibility and any terms of said lease are agreed to by the undersigned including but not limited to Attorney's fees which shall become part of this agreement by reference thereto.

As Parent or Guardian, I will be providing support in the amount of approximately \$ _____ per year to applicant during the term of his or her lease.

I understand this agreement and agree to the terms thereof this day of _____ 20__.

Co-Signer

Notary Public

Social Security Number

Date of Birth

Address

City, State, Zip Code

Home Phone Number

Work Phone Number



Regency Park Apartments

SECURITY DEPOSIT/BINDER AGREEMENT

The Undersign agrees that the "Security Deposit" being paid in the amount of \$_____ is subject to being forfeited if the following events occur:

- 1) The Prospective Resident instructs Regency Park to hold/reserve an apartment and then does not take possession of the apartment by or on the mutually agreed move-in date.
- 2) Regency Park discovers that the Resident has misrepresented the facts in the Resident Application.
- 3) There is a Breach or Early Termination of the Lease Contract by the Resident as referred to in Section 6 and Section 20 of the Lease Contract.

In the event Regency Park is unable to deliver the apartment to the Resident on the agreed date, the Resident may request and is entitled to a return of their Security Deposit.

Prospective Resident

Date

Regency Park Management
Performance Investments of the Carolinas, LP/Landlord

Date

Apartment # To Be Reserved



Renters Insurance Information

Regency Park Apartments requires all residents to provide Proof of Insurance (Renters Insurance) before keys are issued.

The coverage must be as follows:

Contents Coverage: You may choose your limit for your "Contents" insurance amount based on the value of your property. You should choose "Replacement Cost" insurance.

Liability Insurance: Your Policy must provide a **Minimum 300,000 liability limit.**
Regency Park must be listed as a "Additional Insured" on your policy.

The information below may be helpful in obtaining discounts with your Insurance carrier:

Building Completion Date:	132 Building	5/01	24 Apartments in the building
	130 Building	6/01	36 Apartments in the building
	123 Building	7/01	24 Apartments in the building
	125 Building	8/01	24 Apartments in the building
	127 Building	9/01	24 Apartments in the building

The Buildings are Wood Frame and Vinyl Siding Construction

Breezeway Firewalls; one side of each breezeway has a firewall that extends through the attic to the underside of the roof deck.

All apartments have a fire extinguisher under the Kitchen Sink

The apartments are equipped with smoke detectors.

The Buildings are equipped with a Monitored NFPA 13R Sprinkler system throughout each building with fire horns in each apartment.