

Great Location:

Located just south of downtown Raleigh and a 10 minute walk to Restaurants, Shops, Hotels, Red Hat Amphitheater and the Raleigh Convention Center
Conveniently located near I-40 and on the CAT bus route

Exceptional neighborhood

- 1 Bedroom Apartments with Covered Patio
- 2 Bedroom Townhomes with 2-1/2 Baths (in most units)

Beautiful Landscaping – no grass to cut – we do it all!
Newer Construction, with ceiling fans in all living rooms and bedrooms, storage areas,
Cable ready, plentiful kitchen storage and cabinets, luxury vinyl flooring
Full Size Washer/Dryer connections in each home

Pet friendly with restrictions per Pet Policy

SMOKE FREE COMMUNITY

APPLY TODAY!

\$60 APPLICATION FEE

Non-Refundable

Money Order or Certified Funds Only

Payable to: CAD (Capitol Area Developments)

Please provide **copies** of the following: Social Security card, Valid ID, 4 consecutive paystubs

Management will verify:

- Landlord References
- Criminal Background
- Credit History
- Income Sources (minimum gross income must be **3 times** the monthly rent)

Security Deposit is based on Credit Score: 650 and higher = 1 month rent, 600-649 = 2 month's rent
Applications with Credit Scores of less than 600 are not approved
Pet Deposits are per Pet Policy (ask for details if you have a pet)
Initial Lease Term is a 12-Month Lease

FOR MORE INFORMATION:

Call: 919-508-1237

Email: walnutnc@cadcommunities.com



FOR OFFICE USE ONLY



PROPERTY NAME: Walnut Terrace DATE OF APPLICATION: _____ AMR
 ADDRESS APPLYING FOR _____ Wheelchair Accessible

APPLICANT'S LAST NAME _____ UNIT SIZE _____ STAFF INITIALS _____

THE NEW WALNUT TERRACE COMMUNITY WILL CONSIST OF ALL SMOKE-FREE UNITS WITH
 SMOKING PERMITTED IN DESIGNATED OUTSIDE AREAS ONLY

PLEASE ANSWER ALL QUESTIONS:

NUMBER OF BEDROOMS NEEDED: 1BR 2BR

 HOW DID YOU HEAR ABOUT WALNUT TERRACE?

HOUSEHOLD COMPOSITION:

LIST ALL PEOPLE TO OCCUPY HOME:				SOCIAL SECURITY#	DATE OF BIRTH	DRIVERS LICENSE/STATE ID NUMBER
1	2	3	4			
1	LAST NAME, FIRST, MI					
2						
3						
4						

EMAIL ADDRESS: _____

PRESENT ADDRESS: _____ PHONE: _____
 _____ WORK: _____
 CELL: _____

MGMT/MORTGAGE COMPANY: _____ LANDLORD PHONE: _____

HOW LONG AT PRESENT ADDRESS

DATE MOVED IN: _____ DATE MOVED OUT: _____

OWN OR RENT: _____ AMOUNT OF MONTHLY RENT/MORTGAGE: \$ _____

REASON FOR MOVING: _____

PREVIOUS ADDRESS: _____

MGMT/MORTGAGE COMPANY: _____ LANDLORD PHONE: _____

HOW LONG AT PREVIOUS ADDRESS:

DATE MOVED IN: _____ DATE MOVED OUT: _____

OWN OR RENT?: _____ AMOUNT OF MONTHLY RENT/MORTGAGE: \$ _____

REASON FOR MOVING: _____

EMPLOYMENT/INCOME INFORMATION

APPLICANT INFORMATION

PRESENT EMPLOYER: _____
Address: _____
Telephone Number: _____ Fax: _____
Dates of Employment From: _____ To: _____
Position: _____ Supervisor: _____
Number of Hours Worked per Week: _____ **Gross Monthly Salary:** \$ _____

PREVIOUS EMPLOYER: _____
Address: _____
Telephone Number: _____ Fax: _____
Dates of Employment From: _____ To: _____
Position: _____ Supervisor: _____
Number of Hours Worked per Week: _____ **Gross Monthly Salary:** \$ _____

OTHER SOURCE OF INCOME: _____
Address: _____
Telephone Number: _____ Fax: _____
Contact person: _____ **Gross Monthly Amount:** \$ _____

HOUSEHOLD MEMBER'S INFORMATION

PRESENT EMPLOYER: _____
Address: _____
Telephone Number: _____ Fax: _____
Dates of Employment From: _____ To: _____
Position: _____ Supervisor: _____
Number of Hours Worked per Week: _____ **Gross Monthly Salary:** \$ _____

PREVIOUS EMPLOYER: _____
Address: _____
Telephone Number: _____ Fax: _____
Dates of Employment From: _____ To: _____
Position: _____ Supervisor: _____
Number of Hours Worked per Week: _____ **Gross Monthly Salary:** \$ _____

OTHER SOURCE OF INCOME: _____
Address: _____
Telephone Number: _____ Fax: _____
Contact person: _____ **Gross Monthly Amount:** \$ _____

BANKING REFERENCES

ASSET	NAME OF BANK/INSTITUTION	PHONE NUMBER	ACCOUNT NUMBER	ACCOUNT BALANCE
Checking Account			No need to give Number	\$
Savings Accounts			No need to give Number	\$

GENERAL INFORMATION

Have you or Co-Applicant ever been sued for non-payment of rent?..... Yes___ No___
 Have you or Co-Applicant ever been evicted or asked to move out?..... Yes___ No___
 Have you or Co-Applicant ever broken a Rental Agreement or Lease?..... Yes___ No___
 If yes, please explain: _____
 Have you or Co-Applicant declared Bankruptcy?..... Yes___ No___
 If yes, what year? _____
 Have you or Co-Applicant been convicted of a Felony?..... Yes___ No___
 Would you or any member of your household benefit from a Handicapped-Accessible Unit?..... Yes___ No___
 Does a household member require a Wheelchair Accessible home?..... Yes___ No___
 Do you own a PET..... Yes___ No___ If yes, what type/breed: _____
 Weight at full maturity: _____ lbs. How Many Pets: _____ Housebroken? Yes___ No___
 Veterinarian who can verify pet information/shot record: _____

PLEASE LIST AN ALTERNATE ADDRESS AND PHONE NUMBER:

ALTERNATE CONTACT: Name _____
 Address _____
 Phone _____

➤Please attach the following verifications when returning your application: ⚡

1. State Issued Picture ID AND Social Security card for ALL adult family members
2. Proof of all Monthly Household Income (Copies of 4 weeks worth of consecutive pay stubs are fine)

BY SIGNING BELOW APPLICANT(S) AUTHORIZES MANANAGEMENT AND ITS STAFF TO VERIFY INFORMATION THROUGH ANY AGENCIES, POLICE DEPARTMENTS, CREDIT BUREAUS, REFERENCES AND GROUPS OR ORGANIZATIONS TO OBTAIN ANY INFORMATION OR MATERIALS, WHICH ARE DEEMED NECESSARY TO COMPLETE THIS APPLICATION.

APPLICANT CERTIFIES THAT ALL INFORMATION IN THIS APPLICATION IS TRUE AND CORRECT. THE APPLICANT FURTHER CERTIFIES AND UNDERSTANDS THAT FALSE STATEMENTS OR INFORMATION IS PUNISHABLE BY LAW AND WILL LEAD TO CANCELLATION OF THIS APPLICATION OR TERMINATION OF TENACY AFTER OCCUPANCY. I HAVE INCLUDED INFORMATION FOR ALL WHO (IF APPROVED) WILL LIVE ON THE PROPERTY.

SIGNATURE: _____ DATE: _____
 (APPLICANT)

SIGNATURE: _____ DATE: _____
 (APPLICANT)

