

# Pines at Westdale

***Thank you for your interest in  
our community!***

Welcome to Pines at Westdale! Thank you for picking up an application. Be sure to read the application instruction page to help you complete your application. Do not hesitate to contact us with any questions.

**1 Bedroom/1 Bath**

**\$900**

**2 Bedroom/2 Bath**

**\$1001**

**3 Bedroom/2 Bath**

**\$1148**

## **Amenities:**

Highly energy efficient units with Energy Star Range/Refrigerator/Microwave/Dishwasher/Central HVAC/Washer & Dryer Connection/Patios/Outside Storage Closets/Window Coverings/Clubhouse/Fitness Room/Computer Center/Community Laundry Room/Covered Picnic Area

## **Property Perks:**

Be sure to participate in the community's monthly social and recreational activities.

## **Your rent includes:**

Trash, Lawn care, and pest control

## **You are responsible for paying:**

Electricity, Water, Sewer, and Cable

## **Property Information:**

Pines at Westdale  
1127 S Houston Lake Rd  
Warner Robins, GA 31088  
(478) 845-6151

**Thank you for considering  
Pines at Westdale your new HOME!**



## Application instructions:

- Please return your completed application to the property manager or you can also mail completed applications to:  
Vantage Management  
c/o Pines at Westdale  
P.O. Box 170  
Fyffe, AL 35971
- An application fee in the form of a check or a money-order in the amount of \$50, with an extra \$30 for each additional adult on the application, will be required when your application is pulled from our waitlist for an available unit. We cannot begin working your application until this fee is received. ***The fee is non-returnable.***
- If you would like to expedite the application process, return your application in person and bring the following items:
  - State issued ID
  - Social Security Card
  - Proof of all earned and unearned income
  - Proof of all assets if assets total over \$5000
  - Proof of marital status
  - Birth certificates and social security card for dependents on application
- All applications must be filled out completely. Do not leave anything blank. If there is a blank line on the application that does not apply to you, please write “None” in the section in question.
- Incomplete applications will not be reviewed. A thoroughly completed application will speed up the procedure and make the process easier on you.
- The use of “white out” or “NA” will automatically cause the application to be rejected.
- The Tenant Consent and Release form is part of the application and **must** be signed and returned with the application and application fee.

A security deposit equal to your rent will be due at lease signing. You will not be able to move in without paying a security deposit.

All payments must be check or money-order. ***No cash will be accepted.***

**Thanks again for your interest in our community!**  
**Help us make this your new home!**



## **Screening Policies**

All applicants are held to a 4-point screening standard and a criminal background screening.

### **Applicant Screening**

- Applicants at Family Properties must pass 3 of the 4 criteria to be considered for tenancy.
- Applicants at Rural Development Family Properties must pass 2 of the 4 criteria to be considered for tenancy.
- Applicants at Elderly Properties must pass 2 of the 4 criteria to be considered for tenancy.

The standards are as follows:

1. Leasing Desk Score: The Leasing Desk Score is a feature of Real Page leasing software. Factors that contribute to the Leasing Desk Score are: criminal background, check writing history, credit history and rental history.
  - a. Applicants must achieve a minimum of a 400 Leasing Desk Score. Pass or fail is not the factor in this standard. The minimum score must be 400.
2. Rent to income ratio:
  - a. Applicant must have 2.5 times the rent in income or have a Section 8 voucher. You can determine this by dividing the applicant's monthly income by 2.5. That amount must be equal or greater than the monthly rent.
3. Checking Account
  - a. Applicant must have a checking account with a positive current balance. Only checking accounts qualify for this standard. Savings accounts and Direct Express Cards do not count as meeting this standard.
4. Landlord Reference
  - a. These references will pertain to the payment of rents in a timely manner, to the care taken of the unit occupied, the history of violence, disruptive behavior, or abuse of a controlled substance and could be grounds for rejection. Applicants are required to have 2 years of positive landlord reference. If the applicant has lived with a family member during the prior 2 years, landlord references must be obtained from before that stay to meet this standard.

**If an applicant has a previous eviction, the applicant will be rejected regardless of scoring on screening policies. If an applicant previously rented from any complex managed by Vantage Management and left with a balance owed for rent, utilities, damages or any other charge, they are ineligible to rent from any complex managed by Vantage Management in the future.**

**If an applicant owes a previous landlord (other than a complex managed by Vantage Management) money, the applicant must show proof that the amount has been paid off.**

Any applicant who fails to meet the applicable screening requirements will be given prompt written notification of the grounds for rejection.

## Criminal Background Policy

This policy does not apply to PBRA properties and Section 811 units. Please refer to the tenant selection plans for those properties.

A criminal background check will be completed on all applicants age 18 or older\*. Applicants who have been convicted of or plead guilty of manufacturing methamphetamine in federally-assisted housing and/or are required to register as a lifetime sex offender will be permanently and automatically denied from housing.

Applicants who have been convicted of or have a deferred adjudication for the following offenses will be denied from housing now, but may reapply after the below mentioned time frames have expired:

- ☐ Felony conviction or a deferred adjudication for any of the following felony offenses in the last 15 years: arson, kidnapping, rape, sexual assault, crimes of a sexual nature, capital murder, murder, manslaughter, or 2 or more of any type of felony case that resulted in conviction within the last 15 years. Applicant must have been release from jail or prison 3 years prior to applying for residency.
- ☐ Misdemeanor conviction or deferred adjudication involving crimes against property, violent crimes against persons or for serious drug related offenses within the last 5 years.

Any applicant who fails to meet the applicable screening requirements or the criminal background criteria will be given prompt written notification of the grounds for rejection. We welcome an interactive dialogue with you regarding any concerns you may have about a rejection of your application due to criminal background screening results. We would also welcome any documentation you would like to submit for consideration that may help explain the circumstances of the criminal charge, which we will consider on a case-by-case basis.

Crimes related to circumstances protected under Violence Against Women Act (VAWA) may not be considered. For a reasonable accommodation request, please see the Site Manager of the property.

\*While all households have been screened prior to tenancy, this does not create a guarantee as to the criminal history of each resident or occupant.

| <u>Bedrooms</u> | <u>Bath</u> | <u>Unit Count</u> | <u>Sq Ft</u> | <u>UA</u> | <u>Rent</u> | <u>40%</u> |
|-----------------|-------------|-------------------|--------------|-----------|-------------|------------|
|-----------------|-------------|-------------------|--------------|-----------|-------------|------------|

|   |   |    |      |     |            |            |
|---|---|----|------|-----|------------|------------|
| 1 | 1 | 33 | 829  | 132 | \$900.00   | \$2,250.00 |
| 2 | 2 | 82 | 1073 | 128 | \$1,001.00 | \$2,502.50 |
| 3 | 2 | 29 | 1295 | 161 | \$1,148.00 | \$2870.00  |

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Warner Robins, GA HUD Metro FMR Area

|     |          |          |          |          |          |          |          |          |
|-----|----------|----------|----------|----------|----------|----------|----------|----------|
| 50% | 1 Person | 2 Person | 3 Person | 4 Person | 5 Person | 6 Person | 7 Person | 8 Person |
|     | \$34,200 | \$39,100 | \$44,000 | \$48,850 | \$52,800 | \$56,700 | \$60,600 | \$64,500 |

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2025 MTSP INCOME LIMIT AREA

|     |          |          |          |          |          |          |          |          |
|-----|----------|----------|----------|----------|----------|----------|----------|----------|
| 60% | 1 Person | 2 Person | 3 Person | 4 Person | 5 Person | 6 Person | 7 Person | 8 Person |
|     | \$41,040 | \$46,920 | \$52,800 | \$58,620 | \$63,360 | \$68,040 | \$72,720 | \$77,400 |

# PREAPPLICATION

NOTE: NO PETS ALLOWED WITHOUT MANAGEMENT APPROVAL

## Contact Information:

|                   |              |        |        |                        |       |
|-------------------|--------------|--------|--------|------------------------|-------|
| Applicant Name    | First        | Middle | Last   | State ID #             | State |
| Co-Applicant Name | First        | Middle | Last   | State ID #             | State |
| Email             | Phone Number |        |        | Alternate Phone Number |       |
| Street Address    | City         |        | State  | Zip                    |       |
| Landlord Name     |              |        | Phone# |                        |       |

## General Information:

How did you hear about us? \_\_\_\_\_

What date would you like to move? \_\_\_\_\_

What is your reason for moving? \_\_\_\_\_

What size unit are you interested in (number of bedrooms)? \_\_\_\_\_

## Emergency Contact:

In case of emergency, notify: \_\_\_\_\_ Phone \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Relationship \_\_\_\_\_

In case of serious illness or death, is the above authorized to enter apartment and remove contents? • YES • NO

## Applicant Screening Information:

Does an adult member of your household have a checking account? • YES • NO

Does your household have two years positive rental history? • YES • NO

What is your household annual gross income from all sources? \_\_\_\_\_

Has anyone in your household had an eviction filed against you? • YES • NO

If yes, please explain: \_\_\_\_\_

## Employment Information:

For Applicant - Name of Business \_\_\_\_\_ Phone # \_\_\_\_\_

For Co-Applicant - Name of Business \_\_\_\_\_ Phone # \_\_\_\_\_

## For Management Use Only:

Date Application Submitted: \_\_\_\_\_

Date & Amount of Application Fee Paid: \_\_\_\_\_



# APPLICATION FOR RESIDENCY

IF ANY ERROR OCCURS ON APPLICATION, PLEASE PUT ONE LINE THROUGH IT, MAKE CORRECTION, INITIAL CORRECTION, AND DATE IT.

**Providing or certifying false information is fraud and among other consequences you could face eviction, imprisonment for up to 5 years and fines of up to \$10,000 for committing housing fraud.**

Therefore, please be careful when you fill out this application. You must list:

1. All sources of income for all household members including money received on behalf of your dependents.
2. All assets and income from assets.
3. Any business or asset that you sold in the last two years for less than full value.
4. Accurate student information for all household members
5. The names of everyone who will be living in this household.

I/We have read and understand the above listed requirements.

Applicant Signature

Co-Applicant Signature

Co-Applicant Signature

## Household Composition

List all persons who will occupy the apartment during the next 12 months.

Please only list dependents who will live in this household at least 50% of the time and dependents who are currently away at school but plan to occupy the apartment.

| NAME<br>(First, Middle Initial, Last) | RELATIONSHIP<br>TO HEAD OF<br>HOUSEHOLD | SE<br>X<br>M/F | DOB | SOCIAL SECURITY<br>NUMBER | MARITAL STATUS                                                                                                                                                                  | STUDENT<br>(Full Time / Part<br>Time / or Not a<br>Student)                                          |
|---------------------------------------|-----------------------------------------|----------------|-----|---------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|
|                                       | Self                                    |                |     |                           | <input type="checkbox"/> Married <input type="checkbox"/> Single<br><input type="checkbox"/> Divorced <input type="checkbox"/><br>Widowed<br><input type="checkbox"/> Separated | <input type="checkbox"/> FT or <input type="checkbox"/> PT<br><input type="checkbox"/> Not a Student |
|                                       |                                         |                |     |                           | <input type="checkbox"/> Married <input type="checkbox"/> Single<br><input type="checkbox"/> Divorced <input type="checkbox"/><br>Widowed<br><input type="checkbox"/> Separated | <input type="checkbox"/> FT or <input type="checkbox"/> PT<br><input type="checkbox"/> Not a Student |
|                                       |                                         |                |     |                           | <input type="checkbox"/> Married <input type="checkbox"/> Single<br><input type="checkbox"/> Divorced <input type="checkbox"/><br>Widowed<br><input type="checkbox"/> Separated | <input type="checkbox"/> FT or <input type="checkbox"/> PT<br><input type="checkbox"/> Not a Student |
|                                       |                                         |                |     |                           | <input type="checkbox"/> Married <input type="checkbox"/> Single<br><input type="checkbox"/> Divorced <input type="checkbox"/><br>Widowed<br><input type="checkbox"/> Separated | <input type="checkbox"/> FT or <input type="checkbox"/> PT<br><input type="checkbox"/> Not a Student |
|                                       |                                         |                |     |                           | <input type="checkbox"/> Married <input type="checkbox"/> Single<br><input type="checkbox"/> Divorced <input type="checkbox"/><br>Widowed<br><input type="checkbox"/> Separated | <input type="checkbox"/> FT or <input type="checkbox"/> PT<br><input type="checkbox"/> Not a Student |

Do you anticipate a change in family size in the next 12 months?

• YES • NO

If yes, please explain \_\_\_\_\_

Has anyone listed above ever gone by another name, such as maiden name or married name?

• YES • NO



If yes, please fill in former name(s): \_\_\_\_\_

Will you receive any rental assistance from an agency at time of move in or in the next 12 months? • YES • NO

If yes, from which agency? \_\_\_\_\_



## Student Information

Have any adults (18 and older) been, or will be, students this calendar year

• YES • NO

| NAME | EDUCATIONAL INSTITUTION | MONTHS ATTENDED DURING CURRENT CALENDAR YEAR | FULL-TIME OR PART-TIME                                                | RECEIVE FINANCIAL ASSISTANCE                             |
|------|-------------------------|----------------------------------------------|-----------------------------------------------------------------------|----------------------------------------------------------|
|      |                         |                                              | <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|      |                         |                                              | <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|      |                         |                                              | <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time | <input type="checkbox"/> Yes <input type="checkbox"/> No |

## Income Information (Entire Household)

Please list all types of income for ALL household members that you will receive over the next 12 months.

This includes but is not limited to:

|                       |                     |                       |                        |
|-----------------------|---------------------|-----------------------|------------------------|
| Employment            | Social Security/SSI | Insurance/Annuities   | Gift Income            |
| Self-Employment       | VA Benefits         | Child Support/Arrears | Severance Pay          |
| Unemployment Benefits | Death Benefits      | Alimony/Arrears       | Anticipated Employment |
| Worker's Compensation | Pension/Retirement  | Public Assistance     | Other Income           |

| NAME | TYPE OF INCOME/CONTACT | MONTHLY GROSS AMOUNT |
|------|------------------------|----------------------|
|      |                        |                      |
|      |                        |                      |
|      |                        |                      |
|      |                        |                      |
|      |                        |                      |
|      |                        |                      |

## Asset Information (Entire Household)

Please list all types of assets for ALL household members

This includes but is not limited to:

|                       |                       |                  |                                |
|-----------------------|-----------------------|------------------|--------------------------------|
| Checking Accounts     | Prepaid Cards         | CDs/Annuities    | Property Held for Investment   |
| Savings Accounts      | Internet-Based Assets | Real Estate      | Whole/Universal Life Insurance |
| Money Market Accounts | Stocks/Bonds          | Rental Property  | Other Assets                   |
| Cash on Hand          | Mutual Funds          | Trust Funds      |                                |
| Direct Express Cards  | Treasury Bills        | Safe Deposit Box |                                |

\*Assets also include disposed or given away assets in the previous 2 years\*

| HOUSEHOLD MEMBER NAME | BANK/CREDIT UNION | TYPE OF ASSET | LAST 4 ACCOUNT # | CURRENT BALANCE | INTEREST RATE |
|-----------------------|-------------------|---------------|------------------|-----------------|---------------|
|                       |                   |               |                  |                 |               |
|                       |                   |               |                  |                 |               |
|                       |                   |               |                  |                 |               |
|                       |                   |               |                  |                 |               |
|                       |                   |               |                  |                 |               |



|  |  |  |  |  |  |
|--|--|--|--|--|--|
|  |  |  |  |  |  |
|--|--|--|--|--|--|

LEASE PROVISIONS

A non-refundable fee is required to cover the cost of credit reports and other processing costs. If you feel that your APPLICATION FOR RESIDENCY has been unfairly denied, you have the right to contact Lowell R. Barron, II at Vantage Management, LLC. the Managing Agent, at (256) 417-4921 for further explanation. Notwithstanding the preceding, however, you acquire no rights in any apartment until all of the following contingencies have been met: 1) your application is approved, 2) you pay the required deposit, and 3) you sign a Lease Agreement. At that time, this application would become part of the Lease.

ALL ADULT APPLICANT(S) MUST READ AND SIGN THIS STATEMENT TO  
ACKNOWLEDGE THEIR UNDERSTANDING

I/We certify that all of the information given above about me and my/our household is true, complete, and accurate. All persons or firms, including persons providing information concerning a criminal background check, may freely give any requested information concerning me/us, and I/we hereby waive all right of action for any consequences resulting from such information. I/We also understand that ALL CHANGES to the INCOME of ANY member of the household, as well as ANY CHANGES in HOUSEHOLD MEMBERS or STUDENT STATUS, must be reported to the Management in writing IMMEDIATELY. If any of the information is found to be incorrect, the landlord, at its sole discretion, may cancel or terminate the lease contract and retain all monies as liquidated damages. I/We also understand that should I/We be placed on a waiting list because no units are available, and I/We am/are later called to fill a vacant unit, I/We will be withdrawn from the waiting list should I/We decide not to lease the unit at that time. I/We will be required to fill out another application and pay another application fee should I/We decide to reapply with this complex.

|                        |               |                       |               |
|------------------------|---------------|-----------------------|---------------|
| _____<br>APPLICANT     | _____<br>DATE | _____<br>CO-APPLICANT | _____<br>DATE |
| _____<br>LEASING AGENT | _____<br>DATE | _____<br>CO-APPLICANT | _____<br>DATE |

*It's our policy to rent to qualified persons regardless of race, color, religion, sex, national origin, handicap, or familial status, and in compliance with all federal, state, and local laws.*



## TENANT RELEASE AND CONSENT

I/We \_\_\_\_\_, the undersigned hereby authorize all persons or companies in the categories listed below to release information regarding employment, income and/or assets for purposes of verifying information on my/our apartment rental application. I/We authorize release of information without liability to the owner/manager of the apartment community listed below and/or the State and Local Agencies/Department's service provider.

### INFORMATION COVERED

I/We understand that previous or current information regarding me/us may be needed. Verifications and inquiries that may be requested include, but are not limited to: personal identity, student status, credit and criminal history, employment, income and assets, medical or child care allowances. I/We understand that this authorization cannot be used to obtain information about me/us that is not pertinent to my eligibility for and continued participation as a Qualified Tenant.

### GROUPS OR INDIVIDUALS THAT MAY BE ASKED

The groups or individuals that may be asked to release the above information include, but are not limited to:

|                                        |                                                        |                                     |
|----------------------------------------|--------------------------------------------------------|-------------------------------------|
| Past and Present Employers             | Welfare Agencies                                       | Veterans Administrations            |
| Support and Alimony Providers          | Educational Institutions                               | Retirement Systems                  |
| State Unemployment Agencies            | Social Security Administration                         | Medical and Child Care              |
| Banks and other Financial Institutions | Previous Landlords (including Public Housing Agencies) |                                     |
| Credit Reporting Agencies              | Household Members                                      | Criminal History Reporting Agencies |

### CONDITIONS

I/We agree that a photocopy of this authorization may be used for the purposes stated above. The original of this authorization is on file and **will stay in effect for a year and one month** from the date signed. I/We understand that I/We have a right to review this file and correct any information that is incorrect. **Everyone 18 years of age and older must sign this form.**

### SIGNATURES

|                                             |                                             |                |
|---------------------------------------------|---------------------------------------------|----------------|
| _____<br>Signature of Applicant/Resident    | _____<br>Printed Applicant/Resident Name    | _____<br>Date  |
| _____<br>Signature of CO/Applicant Resident | _____<br>Printed Co/Applicant/Resident Name | _____<br>Date  |
| _____<br>Signature of Adult Member          | _____<br>Printed Adult Member Name          | _____<br>Date  |
| _____<br>Signature of Adult Member          | _____<br>Printed Adult Member Name          | _____<br>Date  |
| _____<br>Apartment Community Name           | _____<br>Contact                            | _____<br>Phone |

THIS GENERAL CONSENT MAY NOT BE USED TO REQUEST A COPY OF A TAX RETURN. IF A COPY OF A TAX RETURN IS NEEDED, IRS FORM 4506, "REQUEST FOR COPY OF A TAX FORM" MUST BE PREPARED AND SIGNED SEPARATELY.





## We Do Business in Accordance With the Federal Fair Housing Law

(The Fair Housing Amendments Act of 1988)



**EQUAL HOUSING  
OPPORTUNITY**

**It is Illegal to Discriminate Against Any Person Because of Race,  
Color, Religion, Sex, Handicap, Familial Status, or National Origin**

In the sale or rental of housing or residential lots  
In the financing of housing  
In the appraisal of housing

In advertising, the sale, or rental of housing  
In the provision of real estate brokerage services  
Blockbusting is also illegal

**Anyone who feels he or she has been discriminated  
against may file a complaint of housing discrimination:**

**1-800-669-9777 (Toll Free)  
1-800-927-9275 (TTY)  
[www.hud.gov/fairhousing](http://www.hud.gov/fairhousing)**

**U.S. Department of Housing and Urban  
Development**

**Assistant Secretary for Fair Housing and Equal  
Opportunity**

**Washington, D.C. 20410**

Previous editions are obsolete

form HUD-928.1 (8/2011)

I am aware of my rights to Fair Housing.

Tenant Signature

Date

Tenant Signature

Date

