Vinings at Newport

Thank you for your interest in our community!

Welcome to Vinings at Newport! 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**. You will be applying for a low-income housing program.**

1 Bedroom/1 Bath$895
Security Deposit $895
2 Bedroom/2 Bath $995
Security Deposit $995
3 Bedroom/2 Bath $1,095
Security Deposit $1,095

Amenities:

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

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 connecting and paying:
Electricity, Water, Sewer, and Cable

Property Information:
Vinings at Newport
1121 Winding Rd
Kingsland, GA 31548
(912)456-6887

Thank you for considering
Vinings at Newport your new HOME!

VANTAGE MANAGEMENT

EQUAL HOUSING OPPORTUNITY

Application instructions:

- Please return your completed application to the property manager or you can also mail completed applications to:

  Vantage Management
  c/o Vinings at Newport
  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.***
- The below items will also be required when you are contacted for an available unit and may be emailed.
  - 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.

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!

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Apartment Details

1 bedroom	1 bath	830 sq. ft
2 bedrooms	2 baths	1083 sq. ft
3 bedrooms	2 baths	1301 sq. ft

Income Guidelines

Gross Annual (Yearly) Income

must be less than the amounts below!

Number of persons in Household	Maximum Income Limit
1	$39,760
2	$45,430
3	$51,100
4	$56,770
5	$61,320
6	$65,870
7	$70,420
8	$74,970

VANTAGE MANAGEMENT

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.

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.

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: _____

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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 (First, Middle Initial, Last)	RELATIONSHIP TO HEAD OF HOUSEHOLD	SEX M/F	DOB	SOCIAL SECURITY NUMBER	MARITAL STATUS	STUDENT (Full Time / Part Time / or Not a Student)
	Self				☐ Married ☐ Single ☐ Divorced ☐ Widowed ☐ Separated	☐ FT or ☐ PT ☐ Not a Student
					☐ Married ☐ Single ☐ Divorced ☐ Widowed ☐ Separated	☐ FT or ☐ PT ☐ Not a Student
					☐ Married ☐ Single ☐ Divorced ☐ Widowed ☐ Separated	☐ FT or ☐ PT ☐ Not a Student
					☐ Married ☐ Single ☐ Divorced ☐ Widowed ☐ Separated	☐ FT or ☐ PT ☐ Not a Student
					☐ Married ☐ Single ☐ Divorced ☐ Widowed ☐ Separated	☐ FT or ☐ PT ☐ 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
			☐Full-time ☐ Part-time	☐Yes ☐ No
			☐Full-time ☐ Part-time	☐Yes ☐ No
			☐Full-time ☐ Part-time	☐Yes ☐ 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. Not withstanding 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.

_____	_____	_____	_____
APPLICANT	DATE	CO-APPLICANT	DATE
_____	_____	_____	_____
LEASING AGENT	DATE	CO-APPLICANT	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 inquires 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

_____ Signature of Applicant/Resident	_____ Printed Applicant/Resident Name	_____ Date
_____ Signature of CO/Applicant Resident	_____ Printed Co/Applicant/Resident Name	_____ Date
_____ Signature of Adult Member	_____ Printed Adult Member Name	_____ Date
_____ Signature of Adult Member	_____ Printed Adult Member Name	_____ Date
Vinings at Newport Apartment Community Name	_____ Contact	(912)456-6887 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.

VANTAGE MANAGEMENT

EQUAL HOUSING OPPORTUNITY

U. S. Department of Housing and Urban Development

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

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

Version VM 2024.1

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