

apply online

Please contact **Jennifer Genter** for application information at (816) 587-8180.

step 1 of 5: personal information

Thank you for your interest in applying for residency at The Lofts at Zona Rosa. Before beginning your application process, please know that we will ask you to designate your top three preferred units. If you wish to provide these choices, please revisit the **Floor Plans** section to retrieve the unit numbers for your top three lofts. In the event these are taken at the time of your application, we will work with you to find alternates.

* denotes required fields

*First Name

Date of Birth:

*Email Address

*Driver's License State

Marital Status

Single

Spouse or Co-Applicant First Name

Spouse or Co-Applicant Licenses State

Home Phone Number
 - -

Emergency Contact Name

*Last Name

Social Security Number:

Driver's License Number

Maiden Name

Spouse or Co-Applicant Last Name

Spouse or Co-Applicant Drivers Licenses #

Spouse or Co-Applicant Email Address

Work Phone Number
 - -

Emergency Contact Phone Number
 - -

Please list all other persons who will occupy the loft:

Name	Relationship	Date of Birth
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

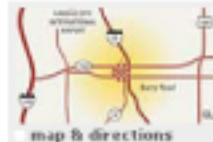
[CONTINUE](#)



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fixtures & finishes



map & directions



frequently asked qs

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Please contact **Jennifer Genter** for application information at (816) 587-8180.

step 2 of 5: residence history

* denotes required fields

A. Present Address

State

Lived From

City

Zip

Lived To

Present Landlord/Complex Phone Number:

Present Landlord/Complex Name & Address:
(Show mortgage company if buying)

B. Previous Address

State

Lived From

City

Zip

Lived To

Previous Landlord/Complex Phone Number:

Previous Landlord/Complex Name & Address:
(Show mortgage company if buying)

C. Previous Address

State

Lived From

City

Zip

Lived To

Previous Landlord/Complex Phone Number:

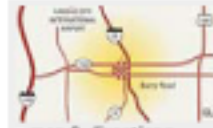
Previous Landlord/Complex Name & Address:
(Show mortgage company if buying)



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step 3 of 5: employment & bank references

* denotes required fields

A. Employed By:

Employer Address:

Employer Phone Number:

____ - ____ - _____

Department or Position:

Employed From: To:

Gross Monthly Income:

B. Prior Employment:

Employer Address:

Employer Phone Number:

____ - ____ - _____

Department or Position:

Employed From: To:

Gross Monthly Income:

C. Spouse's Employer or Second Employment:

Employer Address:

Employer Phone Number:

____ - ____ - _____

Department or Position:

Employed From: To:

Gross Monthly Income:

D. Bank Reference:

Bank Address:

Bank Phone Number:

____ - ____ - _____

How long have you had an account there?:

Account Number:

Account Type:

Checking

E. Other income and amount. Verification will be requested. Please list any SSI, Pension, Disability, Student Grants, Dividends, etc.:

F. Full Time/Part Time Student?:

Yes No

G. Have you ever been convicted of a felony?:

Yes No

H. Character References (family excluded):

Name:

Address:

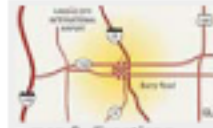
Phone Number:



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step 4 of 5: signature & unit selection

FALSE STATEMENTS OR INCOMPLETE INFORMATION WILL BE GROUNDS FOR DENIAL OF THIS APPLICATION

This application must be initialed by all adults who will occupy the apartment before it can be considered by Landlord. Acceptance of this application and any monies deposited herewith is not binding upon Landlord until approved by Landlord in writing. If approved and the rental unit is held for the applicant and then the applicant withdraws the application, all monies deposited shall be forfeited and applied towards liquidated damages associated with failure to occupy the unit.

In Compliance with the FAIR CREDIT REPORTING ACT this notice is to inform you that the processing of this application includes but is not limited to making any inquiries deemed necessary to verify the accuracy of the information herein, including procuring consumer reports from consumer credit reporting agencies and obtaining credit information from other credit institutions. By submitting this form, the applicant agrees.

I hereby grant this property and APTS, Inc. the right to process this application for the purpose of obtaining a Rental/Lease Agreement with this property. Additionally, I authorize all corporations, companies, and law enforcement agencies academic institutions and current and former employers to release information they may have about me and release them from any liability and responsibility from doing so. A photographic or faxed copy of this application shall be as valid as the original.

All applicants acknowledge that they are applying to rent an apartment located at **Zona Rosa in Kansas City**. **Zona Rosa** is an urban retail environment that features a variety of shopping, dining and entertainment venues. These venues maintain varying hours of operation, including late-night operation. By initialing below, applicant acknowledges his/her acceptance of these hours of operation.

Initials: _____ Date: _____

Initials: _____ Date: _____

Please indicate your preference of units:

1st Choice:

Select a Unit



2nd Choice:

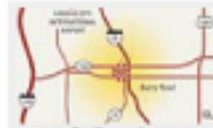
Select a Unit



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step 5 of 5: processing fee

Credit Card Type:

-- Please Select --

Card Number:

Exp. Month:

--Please Select --

Exp. Year:

--Please Select --

[Submit Application!](#)

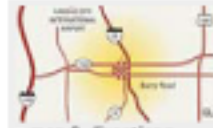
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the lefts floor plans



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