Email:

Date:



Landlord: CTS Professional Mgmt.

LTS Application



Rent:

Pg. 1

Fill out this application thoroughly and return to landlord.

info@CTSpm.com

LL ID #: 2124-CTS	Fax: (314) 414-20	20 (Same as phone number)	Deposit: \$						
Phone: (314) 414-2020	Address of Property:								
How did you hear about this property? Desired move in date:									
We accept all major credit cards, debit cards and PayPal payments. The application fee is \$50 per person or \$60 for a married couple. You must be married at least one year. Married couples that do not share the same last name will need to complete a separate application. To pay using PayPal; go to www.LTservices.us and click "pay now". Your application will not be processed until payment is received. All application fees are non-refundable.									
Do you give LTS permission to process your card for payment? Yes \square No \square									
Name of Card Holder:	Signature (REQUIRED):								
Card Number:	Exp Date:								
Billing Address:	City:	State:							
Security Code (Three digits on back of card):	:	Zip Code (Billing Statement):							
APPLICANT INFORMATION:									
Name: Last First	Middle	Maiden Name:							
SSN:	DOB:	Drivers Lic #:							
Marital Status: Single □ Married□ Separate	d□ Divorced□ Widowed	d□ How Long?							
Cell Number:	Home Number	::							
Email:	Preferred Cont	tact Method: Cell Hor	me 🗆 Email 🗆						
SPOUSE INFORMATION: If you are married a	and do not have the same last	name we need a separate appl	ication.						
Name:		Maiden Name:							
Last First	Middle								
	SSN: DOB: Drivers Lic #:								
Marital Status: Single ☐ Married☐ Separate									
Cell Number:	Home Number Preferred Cont		me □ Email □						
Email: CURRENT ADDRESS:	Freieried Com	act Method. Cell 🗀 Hol							
Street:		Apt #:							
City:	State:	Zip:							
Name of Complex:	Landlord Name:	Phone:							
Rental Amt. \$	Move In Date:	Lease Term I	Date:						
Family ☐ Friend ☐ Rent ☐ Own ☐	Mortgage Lender:		Payment Amt. \$						
Why are you moving?	110118480 2011011	1 wy 1							
PREVIOUS ADDRESS:									
Street:		Apt #:							
City:	State:	Zip:							
Name of Complex:	Landlord Name:	Phone:							
Rental Amt. \$	Move In Date: Lease Term Date:								
Family ☐ Friend ☐ Rent ☐ Own ☐	Mortgage Lender:	Payment Am	t. \$						
Reason for moving:									

To pay online, go to www.ltservices.us/paynow.html or include payment info below along with a 2nd signature to authorize payment of the fee

PREVIOUS ADDRESS:					Pg. 2
Street:			Apt #:		
City:	State:		Zip:		
Name of Complex:	Landlord N	Name:	Phone:		
Rental Amt. \$	Move In D	Pate:	Lease Terr	m Date:	
Family ☐ Friend ☐ Rent ☐ Own ☐	Mortgage 1	Lender:	Payment A	Amt. \$	
Reason for moving:					
EMPLOYMENT INFORMATION:	(Last two	paycheck stubs required.)			
Employer:	Address:				
Position:	Hire Date:		Term Date	:	
Hourly Rate:	Annual: \$		FT 🗆	PT □	
Supervisor:	Phone:		Paid How	Often:	
PREVIOUS EMPLOYMENT or JOB #2:	(Please sp	ecify)			
Employer:	Address:				
Position:	Hire Date:		Term Date	: :	
Hourly Rate:	Annual: \$		FT 🗆	РТ 🗆	
Supervisor:	Phone:		Paid How	Often:	
SPOUSE INFORMATION: If you are r	narried and do	not have the same last name we n	eed a separate	e application.	
Employer:	Address:				
Position:	Hire Date:		Term Date	: :	
Hourly Rate:	Annual: \$		FT 🗆	РТ 🗆	
Supervisor:	Phone:		Paid How	Often:	
ADDITIONAL INCOME:	Example: S	SI, SS, Child Support, Alimony	y, Food Stamp	ps, Student Lo	oans, etc.
Source:	Amt: \$	How Of	ten:		
Source:	Amt: \$	How Of	ten:		
Are you a student? Yes		Full time or part time?		Full 🗆	Part 🗆
CHILDREN'S NAME/S and Date of Birth					
1.) DOB:		3.)		DOB:	
2.) DOB: PETS:		4.)		DOB:	
How Many? Dog □ Cat □ Bird □ Other □	Age:	Breed:		Weight:	
Dog □ Cat □ Bird □ Other □	Age:	Breed:		Weight:	
AUTOMOBILES:	1 -841	2100		11028220	
Year: Make:	Model:	License plate #:		Payments:	
1.)				\$	
2.)				\$	
REFERENCES:					
Name: Address:		Relationship:		Phone:	
1.)					
2.)					

Name:		Address:	Relationship:	Phone:			
3.)							
4.)							
Our turnaround time is 48-72 hours for our members. LTS may need to contact you directly requesting additional information to complete the screening process. Upon completion, LTS will provide our member with a recommendation. We are under no obligation to the applicant. We work for members only!							
Provide a copy of y	our I	Drivers License or Stat	te ID and Social Security card along wi	th the application.			
Checklist: ☑			Verification needed for processi	ng.			
All Applicants:	$\overline{\mathbf{A}}$	Drivers License/Stat	te ID and Social Security Card				
Employed		Paycheck Stubs (Two	o most recent for each job. No cell ph	one pictures accepted).			
Self-Emp/Contractor		Tax Statement & Bank Statements (Two months.)					
Military		Leave & Earning Star	Leave & Earning Statement (LES)				
SSDI or SSI		Award Letter or Ban	k Statement (If you have direct depo	osit.)			
Pension		Award Letter or Bank Statement (If you have direct deposit.)					
Child Support		Provide your payment ledger.					
Maintenance (Alimony)		Provide your paymen	t ledger.				
Food Stamps/Cash Asst.		Letter from Department of Social Services or DHS.					
Section 8/HUD		Voucher with expirat	ion date and unit size. Name and nun	nber for your case worker.			
Pre-Qualify Questions/Criteria:							
Do you bring three times the	e ren	tal amount into your h	nousehold each month?	Yes \square No \square			
Is this verifiable income?		Yes □ No □	Are you paid with cash?	Yes □ No □			
Have you ever been evicted	?	Yes □ No □	Have you ever been asked to move?	Yes □ No □			
Have you ever broke a lease?		Yes □ No □	Have you ever damaged property?	Yes □ No □			
Have you ever filed bankruptcy? Yes \square No \square		Are you currently in a bankruptcy?	Yes □ No □				
			When? Where?				
Do you have a criminal record? Yes \(\text{No} \)		When? Where?					
Have you been charged with a felony? Yes \square No \square		When? Where?					
Comments:	ony.	105 🗆 110 🗆	when.				
Comments.							
Applicant(s) now certifies	that	the information prov	vided on this application is accurate a	and truthful. Applicant/s			
		-	ıbsidiaries will obtain a credit report				
			screening company that processes a				
O	•		Employer, Past Employer, Landlor				
		· · · · · · · · · · · · · · · · · · ·	dit Union and Personal References to				
requested. Also, I give LT	S per	rmission to process m	y credit card or debit card for the n	on-refundable application			
		fee I provided or	n the top of the first page.				
SIGNATURES:							
Applicant (Print):							
Last	First	Middle	Applicant Signature	Date			
Spouse (Print):							
Last	First		Applicant Signature	Date			
Landlord or Authorized Agent Signature:							
Print Name:			Signature:				

How To Fill Out The Application (Quick Screening Process)

LTS has provided clear instruction through out the application for your convenience.

- ► Use black or dark blue ink only.
- ► Fax or email the application to the landlord, not LTS.
- ► Fill out the application completely with phone numbers and any requested information to ensure a quick turnaround time.
- ▶ Provide current and previous employment information with phone numbers.
- ▶ Provide current and previous landlord information with phone numbers.
- ▶ If your last name does not match you will be required to fill out a separate application (no exceptions).
- ▶ Payment is due at the time the application is submitted by credit, debit card, or PayPal. LTS does not accept any payments over the phone. LTS will not start the screening process without payment.
- ▶ Make sure you sign the application. LTS cannot process the application without written consent signed by you.
- ► Make sure the rental amount is on the application.

LTS Criteria

- ▶ LTS will not process any application(s) without a social security number and date of birth (no exceptions).
- ► Must be at least 18 years old.
- ▶ Provide valid drivers license or ID card, and social security card. (Make a copy and fax or email it with application.)
- ► No evictions.
- ▶ You need at least three times the rental amount per month (gross).
- ► Reasonable credit.

Email: LTS@LTservices.us

► Most students will need a co-signer.

EVERYONE MUST FOLLOW THE FEDERAL FAIR HOUSING LAWS AND CANNOT DISCRIMINATE AGAINST ANY PERSON BECAUSE OF RACE, COLOR, RELIGION, SEX, SEXUAL ORIENTATION, MILITARY, HANDICAP, FAMILIAR STATUSOR, OR NATIONAL ORIGIN. LTS IS A THIRD PARTY SCREENING COMPANY. WE ARE NOT THE FINAL DECISION MAKER. THE PERSON(S) YOU APPLIED WITH IS. WE ONLY PROVIDE A RECOMMENDATION.

LTS does not accept phone pictures. We cannot open them. You can use a free app on your smart phone called "Tiny Scanner" to help you convert the JPEG format to PDF. LTS gathers our facts from the information you put on the application and several other resources. LTS will obtain a credit report and personal profile. We will research any address you have resided at. Be honest when filling out the application to avoid being denied. If we find any discrepancies on the application, you will not be recommended. Upon completion, send the application to the member that is provided on top of the 1st page. If you email it you can copy LTS in. The landlord you applied with must have a copy of the application(s) before we can start the screening process.

LTS will not return phone calls or emails to a third party.

IMPORTANT: DO NOT Fax or Email directly to LTservices.

Email or Fax Completed Applications to CTS Professional Management for preliminary review.

Email to: Info@CTSpm.com -- Fax to: (314) 414-2020

Phone: (618) 346-6986 Fax: (618) 346-6988