



1234 Massachusetts Avenue, NW
Washington, DC 20005
202-347-6695
Leasing@ZenApollo.com

Zen Apollo recognizes the allure of city living and values the serenity found in moments away from it.

Thank you for your interest in our community, and we're delighted you stopped by. Our studio apartments are priced between \$1,500 and \$1,800, with sizes ranging from 470 to 550 square feet. For one-bedroom units, prices range from \$1,900 to \$2,200, with sizes spanning from 672 to 898 square feet. All utilities are included in these rates.

We offer lease options for six, nine, twelve, and thirteen months, providing flexibility to suit your needs. Additionally, furnished apartments are available for those seeking convenience.

Our community is pet-friendly, welcoming pets of non-aggressive breeds weighing up to 25lbs. There's a \$500 non-refundable deposit per pet along with a \$50 monthly fee per pet.

For added convenience, we offer a package room service with a one-time sign-up fee of \$20.

If you require parking, we offer reserved parking spaces at \$225 per month with a minimum commitment of three months.

To Apply:

- Completed application per adult.
- Driver's license or passport & visa
- (3) Three Consecutive paystubs or a letter of employment
- \$50 application fee per adult in the form of a money order or cashier's check
- \$500 Reservation fee
- Utility bill with current address (if available)
- Income Qualification: Annual salary is equal to 3 times the monthly rent.
- We accept guarantors.
- Security Deposit is equal to one month's rent.

We hope you choose to become a resident at Zen Apollo apartments!

Things You Need to Know Before Filling Out an application.

1. When submitting your application, ensure you have a money order or certified check for \$50 per individual or married couple as an application fee.
2. Complete all applicable blank spaces on your application before submission to avoid being asked to return and provide missing information.
3. Provide three consecutive pay stubs. If unavailable, a letter from your employer on the company letterhead stating salary, job description, and length of employment is required. Self-employed individuals must provide the previous three years' tax returns for income verification.
4. Upon approval of your rental application, a non-refundable advance reservation or administrative fee of \$500, in the form of a money order or cashier's check, is required to secure the apartment. This fee is waived if your application is declined.
5. If child support contributes to salary requirements, provide a copy of a court document or a notarized statement from the paying parent.
6. Proof of current address is necessary, which can be provided with a driver's license or other valid state/federal issued photo ID. Alternatively, a utility bill addressed to you at the listed address is acceptable. Any discrepancies in address require a USPS official change of address card.
7. For first-time renters, a notarized letter from current residing individuals confirming residency is needed. If renting in a private residence, provide a lease copy and the last three rent payment proofs. Misrepresentations lead to immediate disapproval.
8. Applications with negative credit bureau, landlord, or employer information will not be accepted.
9. We adhere to Equal Opportunity Regulations, ensuring equal housing access without discrimination based on race, color, religion, national origin, sex, handicap, or family status.
10. A 48-hour window exists post-approval for application cancellation. Failure to cancel within this timeframe results in forfeiture of the \$100 advance rental deposit.

Tenant Name: _____

Apartment #: _____

Parking Space #: _____

Parking Start Date: _____

Sign and Date: _____

Parking End Date: _____

Sign and Date: _____

Note: This sheet is not properly completed unless signed and dated by the relevant tenant.

Zen Apollo

Application for Lease

Date: _____ Phone #: _____ Email: _____ Apt. Applied For: _____
Applicant: _____ DOB: _____ Age: _____ SS#: _____
Marital Status: _____ ID#: _____ State: _____
Name of Spouse: _____ Age: _____ SS#: _____
ID#: _____ State: _____ Applicant Citizenship: _____ Spouse: _____
to Occupy Premises: _____ Adults: _____ Children: _____ Children Ages: _____ Sex: _____
Apt. to be used: For Residence: _____ For Business: _____
Present Address: Apt #: _____ Street Address: _____
City: _____ State: _____ Zip: _____
Own: _____ Rent: _____ Living with friend/relative: _____ Board: _____ Other: _____
How Long?: _____ Present Rent/Mortgage: _____ Land Lord: _____
Phone #: _____ Address: _____
Has lease expired?: _____ Have you given notice?: _____ Reason for leaving?: _____
Prev. Address: Apt #: _____ Street Address: _____
City: _____ State: _____ Zip: _____
Own: _____ Rent: _____ Living with friend/relative: _____ Board: _____ Other: _____
How Long?: _____ Present Rent/Mortgage: _____ Land Lord: _____
Phone #: _____ Address: _____
Reason for Leaving?: _____
Applicant Employer: _____ Position: _____
Address: _____ Annual Salary: \$ _____
Supervisor: _____ How Long?: _____ Business Phone: _____
Prev. Employment, if at present job less than one year: _____ Position: _____
Address: _____ Annual Salary: \$ _____
Supervisor: _____ How Long?: _____ Business Phone: _____
Spouse Employer: _____ Position: _____
Address: _____ Annual Salary: \$ _____
Supervisor: _____ How Long?: _____ Business Phone: _____
Prev. Employment, if at present job less than one year: _____ Position: _____
Address: _____ Annual Salary: \$ _____
Supervisor: _____ How Long?: _____ Business Phone: _____
Other Income Source: _____ Amount: \$ _____
Bank Reference: _____ Checking Acct: _____
Savings Acct: _____
Credit References: _____ Account #: _____
Account #: _____
Account #: _____
Emergency Contact: _____
Address: _____ Phone #: _____
Applicant Signature: _____
Spouse Signature: _____

Deposit is made herewith on account of the first month's rent, said deposit to be held by Peter N. G. Schwartz Management Co. subject to acceptance and approval of this application. Within five (5) days after being notified of acceptance, applicant agrees to (1) execute a lease before possession of the premises is given; (2) pay any balance due on the first month's rent; and (3) pay any required security deposit; or the deposit will be forfeited as liquidated damages. If this application is not approved and accepted, the deposit will be refunded.



TO: (Name & address of employer)

Date: _____

Employer Phone Number: _____ Employer Email or Fax#: _____

RE (Applicant/Tenant Name & Unit#): _____

I hereby authorize release of my employment information

Signature of Applicant/Tenant Date

Note to Applicant/Tenant: You do not have to sign this form if either the requesting organization supplying the information is left blank. The individual named directly above is an applicant of a housing program that requires verification income. The information provided will remain confidential to satisfaction of that stated purpose only. Your prompt response is crucial and greatly appreciated.

Project Owner/Management Agent

Return form to:

Zen Apollo
Peter NG Schwartz Management Company
1234 Massachusetts House
Washington, DC 20005
Phone (202) 347-6695
Fax (202) 347-5133
Email: leasing@zenapollo.com

****Note** Section below to be completed by employer.**

Employee Name: _____ Job Title: _____

Presently Employed: Yes _____ No _____ Start Date: _____ Last Day of Employment _____

Current Gross Wages/Salary \$ _____ (Circle One) hourly weekly bi-weekly semi-monthly monthly yearly other: _____

Average # of regular hours per week: _____

Number of weeks per year: _____

Overtime Rate: \$ _____ per hour Average # of overtime hours per week: _____

Shift Differential Rate: \$ _____ per hour Average # of shift differential hours per week: _____

Commissions, bonuses, tips, other \$ _____ circle one: hourly weekly bi-weekly semi-monthly yearly other: _____

List any anticipated change in the employee's rate of pay within the next 12 months: _____ Effective date: _____

If the employee's work is seasonal or sporadic, please indicate the layoff period(s): _____

Additional Remarks: _____

Employer's Signature _____ Employer's Printed Name and Title _____ Date _____

Company/Employer Name & Address: _____

Date: _____

Current/Previous Landlord: _____

Phone #: _____

Email or Fax #: _____

Release of Resident History Information:

I, _____, of Apt# _____ authorize the release of all information on this Landlord Verification Form. I understand it will be used only to determine my eligibility to this housing program.

Signature of Applicant/Tenant

Date

To Whom It May Concern:

The person whose name appears above has applied for housing at our property and has given your name as a current or former landlord. Our tenant selection policy requires us to verify certain information about all members of families applying for admission to our apartment community. Please complete this form and return to us by faxing it to (202) 347-5133 or via email to leasing@zenapollo.com. Final action on this applicant will be deferred until we receive your reply. Information will be used only to determine applicant's eligibility.

Thank you for your assistance.

Current/Previous Address: _____

Landlord's Name: _____

___ Current ___ Previous ___ Other: _____

Relationship to Applicant:

___ Relative ___ Friend ___ Other: _____

Tenancy from _____ to _____

1) Rental Payments

- A. Applicant's Rent: _____
- B. Did the applicant pay rent on time? Yes No
- C. Did you ever begin eviction proceedings for nonpayment or any other reason? Yes No
- D. Does the applicant owe you any money? Yes No
- E. Did the applicant have a lease? Yes No

2) Care of Rental Unit

- A. Did the applicant keep the rental unit clean, safe and sanitary? Yes No
- B. Did the applicant, and/or the applicant's family/guest(s) damage the rental unit? Yes
- No
- (if yes) 1. Did the applicant pay for damages? Yes No
- 2. Was it necessary to make deductions from the security deposit? Yes No

C. Did the applicant, and/or the applicant's family/guest(s) engage in careless or unsafe smoking habits?
Yes No

3) General

A. Did the applicant have any unauthorized person(s) residing in the rental unit? Yes
No

B. Did the applicant and/or applicant's family/guest(s) engage in any unlawful acts or any
unlawful use of the rental unit? Yes No

C. Did the applicant and/or applicant's family/guest(s) create any disruptive, noisy or otherwise
offensive use of premises? Yes No

D. Did the applicant keep any unauthorized pets in the rental unit? Yes No

E. Why did the applicant move out of your rental unit? _____

F. Would you re-admit this applicant to your property? Yes No

G. Additional Comments: _____

Signature of Housing Provider/Agent Providing Information: _____