

RENTAL APPLICATION

This Rental Application is an offer to rent. The Deed of Lease is a legally binding contract.

It is unlawful to discriminate on the basis of race, color, religion, national origin, sex, elderliness, familial status or handicap. This application will be processed in accordance with all Fair Housing and occupancy laws.

BROKERAGE DISCLOSURE

The applicants acknowledge by their initials that in this real estate lease transaction the Listing Broker, _____, represents the Landlord and that the Leasing broker, _____, represents the Landlord **OR** the Tenant. (If the Broker is acting as a dual representative of both the Landlord and Tenant, then the appropriate disclosure form is attached to and made a part of this Application.

Applicant/s Initials _____ / _____

Leasing Agent must attach a business card.

Applicant/s Identification Type & Expiration Date: _____ .

OFFER TO RENT

_____ (Applicant 1) and _____ (Applicant 2) offer to lease the property known as _____, Virginia _____ ("Premises"), for _____ years/months beginning _____, for the monthly rent of \$ _____ payable in advance on the first day of each month.

CONDITIONS

A NON-REFUNDABLE PROCESSING FEE OF \$ _____ per Applicant is included with this application. Processing may take up to 5 business days to complete. **AN EARNEST MONEY DEPOSIT OF \$ _____ ("Deposit")** is included and will be held by _____. If this Application is accepted, the Deposit will be credited to amounts owed to the Landlord. If this Application is not accepted, the Deposit will be refunded to the Applicant(s) less any additional documented processing charges.

Occupancy is subject to possession being delivered by the present occupant. **The property is accepted "As Is" unless otherwise noted below or by attachment.**

CONTACT NUMBERS: APPLICANT 1

APPLICANT 2

C: _____

C: _____

H: _____

H: _____

W: _____

W: _____

Email: _____

Email: _____

OFFICE USE ONLY

Application Received Date _____ Time _____

Application Reviewed By _____

Approved Rejected Withdrawn Applicant of Agent notified Date _____ Time _____

APPLICANTS AGREE AND UNDERSTAND THAT:

1. This Application, each occupant and each pet are subject to acceptance and approval by the Landlord.
2. The Listing Company is obligated to present all Applications to the Landlord until the Lease is signed.
3. Landlord and Landlord's Agent may rescind acceptance and resume marketing the Premises at any time until the Lease is signed.
4. Proof of current income is required. For example:
 - Latest Pay Statements/Stubs
 - Last 2 years' Form W-2 for hourly or weekly pay persons
 - Last 2 years' Form 1040 and Schedule C (if applicable) of self-employed or persons with tip income
 - Copy of LES and orders for military
5. This Application consists of four pages which must be completed in full. Incomplete or missing information will result in delay of a decision. Willful misrepresentation may be grounds for invalidating a Lease.
6. A draft of the proposed Lease may be reviewed through the Listing Broker. If Landlord and Applicant cannot agree on terms, the deposit will be refunded.
7. Applicant must present valid photo identification or 2 forms of ID before signing the Lease.
8. The Applicant is responsible for obtaining property and liability insurance (Renter's Insurance) and assuming utility accounts where required before occupying the Premises.
9. Any move-in fees and utility deposits are the responsibility of the Applicant.
10. Only those persons listed in the Application are to live in the premises.
11. The Premises are not to be used for business except with full knowledge and consent of the Landlord and in conformity with all applicable laws and regulations.
12. Applicant has no Leasehold interest until the Lease is signed.

I/we agree to the above conditions and authorize the firm processing this Application to verify any information contained herein and to perform any credit or investigative inquiries necessary in properly evaluating this Application, and any renewal. If any information is found to be false or misleading, the Application may be summarily rejected.

Signed Applicant 1

Date

Signed Applicant 2

Date

APPLICANT 1

Name

Date of Birth

Social Security Number

Current Street Address

City

State

Zip

From: _____ To: _____
Dates of Occupancy

\$ _____
Rent Mortgage

Landlord/Mortgage Company Name

Phone #

Fax #

Reason for Moving

APPLICANT 2

Name

Date of Birth

Social Security Number

Current Street Address

City

State

Zip

From: _____ To: _____
Dates of Occupancy

\$ _____
Rent Mortgage

Landlord/Mortgage Company Name

Phone #

Fax #

Reason for Moving

APPLICANT 1**Previous Street Address**

City _____ State _____ Zip _____

From: _____ To: _____ \$ _____
Dates of Occupancy _____ Rent Mortgage

Landlord/Management/Mortgage Co. Name _____

Phone # _____ Fax # _____

Reason for Moving _____

EMPLOYMENT**1.** _____
Current Company NameFrom: _____ To: _____
Location _____ Dates of Employment _____\$ _____ /year
Position/Rank _____ Income _____

Supervisor Name _____ Phone _____

2. _____
Previous Company NameFrom: _____ To: _____
Location _____ Dates of Employment _____\$ _____ /year
Position/Rank _____ Income _____

Supervisor Name _____ Phone _____

ADDITIONAL INCOME\$ _____ /year
Source _____ Amount _____**APPLICANT 2****Previous Street Address**

City _____ State _____ Zip _____

From: _____ To: _____ \$ _____
Dates of Occupancy _____ Rent Mortgage

Landlord/Management/Mortgage Co. Name _____

Phone # _____ Fax # _____

Reason for Moving _____

EMPLOYMENT**1.** _____
Current Company NameFrom: _____ To: _____
Location _____ Dates of Employment _____\$ _____ /year
Position/Rank _____ Income _____

Supervisor Name _____ Phone _____

2. _____
Previous Company NameFrom: _____ To: _____
Location _____ Dates of Employment _____\$ _____ /year
Position/Rank _____ Income _____

Supervisor Name _____ Phone _____

ADDITIONAL INCOME\$ _____ /year
Source _____ Amount _____**Do you have any animals? LIABILITY COVERAGE IS REQUIRED FOR DOGS.**

TYPE	BREED	AGE	WEIGHT	M/F	NEUTURED/DECLAWED
					/
					/
					/

VEHICLE 1 TYPE, MAKE, MODEL	STATE	VEHICLE 2 TYPE, MAKE, MODEL	STATE

ADDITIONAL INFORMATION

Do you plan to bring a waterbed or large aquarium into the Premises? YES NO

Do you intend to smoke or permit smoking in the Premises? YES NO

PLEASE ANSWER

- | | <u>Applicant 1</u> | <u>Applicant 2</u> | |
|---|--|--|-------|
| 1. Have you ever filed for bankruptcy? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 2. Have you ever been evicted? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 3. Do you have any judgments? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 4. Have you had a foreclosure? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 5. Are you party to a lawsuit? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 6. Do you pay alimony or child support? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 7. Are you a co-signer for a loan or another lease? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 8. Have you ever had a rental application rejected? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 9. How would you rate your credit? | _____ | _____ | |

DEBTS (List major loans or credit card debt)

Type of Loan	Creditor	Balance	Monthly Payment
1. _____	_____	_____	_____
2. _____	_____	_____	_____

ASSETS (Submit supporting documentation if necessary for qualification)

Type of Asset	Amount
1. _____	_____
2. _____	_____

OTHER OCCUPANTS OF THE PREMISES

(Occupants over 18 must submit separate applications)

LAST NAME	FIRST NAME AND M.I.	M/F	D.O.B.	RELATIONSHIP

DESIGNATED CONTACTS (Someone who knows how to reach you) **OR NEXT-OF-KIN**

- Name _____ Relationship _____

Telephone _____ Address _____ City _____ State _____ Zip _____
- Name _____ Relationship _____

Telephone _____ Address _____ City _____ State _____ Zip _____

*RE/MAX Gateway
4090-B Lafayette Center Drive
Chantilly, VA 20151*

CREDIT CARD AUTHORIZATION FORM

I, _____, hereby authorize RE/MAX Gateway to charge my credit card in the amount of _____.

Type of Card: _____ Visa _____ MasterCard

Credit Card Number: _____

Expiration Date: _____ CVC Code (3 digit number on back of card) _____

Credit Card Billing Address:

Street: _____

City: _____

State: _____ Zip: _____

Cardholder's Signature: _____

Date: _____