



CENTURY 21 NACHMAN REALTY APPLICATION FOR TENANCY

FIFTY DOLLAR (\$50.00) NONREFUNDABLE APPLICATION FEE

SECURITY DEPOSIT AND 1ST MONTHS RENT MUST BE PAID BY CASHIERS CHECK OR MONEY ORDER

 Application is hereby made to lease the premises at ______Unit #_____

 Beginning on the ______day of ______, Number to occupy unit_____

APPLICANT INFORMATION

(Each adult on the lease, other than spouse, must complete a separate application)

APPLICANT

SPOUSE

	Nomo		
Middle		First	Middle
	Address		
	Street	City	
Phone	State	Zip	Phone
	Email		
	Current Landlord		
	Landlords phone #		
	Landlords fax #		
	How long at above ad	ldress?	
	Monthly rent \$		
	Previous address		
		Street	
Zip	City	State	Zip
	Landlords phone #		
	How long at above ad	ldress?	
	Monthly Rent \$		
		of birth Soc. # Address Street Phone State Email Current Landlord Landlords phone # Landlords fax # How long at above at Monthly rent \$ Previous address Zip City Landlords phone # How long at above at Address	Middle Last First of birth Soc. #Date of birth Address Street Phone State Zip Email Current Landlord Landlords fax # How long at above address? Monthly rent \$ Previous address Street Zip City Zip City Street Street

EMPLOYMENT INFORMATION

APPLICANT

SPOUSE

Employer	Employer
Address	Address
Occupation	Occupation
How long employed?	How long employed?
Supervisor	Supervisor
Supervisors phone #	Supervisors phone #
Supervisors fax #	Supervisors fax #
Salary \$Week/Month/Year	Salary \$Week/Month/Year
Salary \$Week/Month/Year	Salary \$Week/Month/Year Additional income * \$
Salary \$Week/Month/Year Additional income * \$	Salary \$Week/Month/Year
Salary \$Week/Month/Year Additional income * \$ Previous Employer Address	Salary \$Week/Month/Year Additional income * \$ Previous Employer Address
Salary \$Week/Month/Year Additional income * \$ Previous Employer	Salary \$Week/Month/Year Additional income * \$ Previous Employer
Salary \$Week/Month/Year Additional income * \$ Previous Employer Address Occupation	Salary \$Week/Month/Year Additional income * \$ Previous Employer Address Occupation

IF MILITARY, COMPLETE FOLLOWING:

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Duty Station:		Duty Station:	
Rank/Rate:	End Current Enlist	Rank/Rate:	End Current Enlist
Commanding Officer:		Commanding Officer:	
Phone:		Phone:	_
Home of Record		Home of Record	

*Applicant need not disclose alimony, child support or separate maintenance income or it's Source, unless applicant wishes it to be considered for the purpose of the Application for Tenancy.

PLEASE COMPLETE FRONT AND BACK

OTHER OCCUPANTS

(Please list full name of all other occupants)

1	Relationship	Date of birth	
2	Relationship	Date of birth	
3	Relationship	Date of birth	
4	Relationship	Date of birth	

BANKING AND CREDIT REFERENCES

CHECKING_ACCOUNT	
Bank # 1	Account #
Bank # 2	Account #
SAVINGS_ACCOUNT	
Bank # 1	Account #
Bank # 2	Account #
CREDIT REFERENCES	
1	Account #
2	Account #

OTHER INFORMATION

Have you ever rented from Century 21 Nacl	nman Realty?	If so, list address		
First Vehicle (year/make/model)		License #	State	
Second Vehicle (year/make/model)		License #	State	
Driver's License #		Year expires	State	
Have you ever: Filed bankruptcy?	_ Discharge date	Had a judgement or o	collection?	Been
evicted? Do you have pets?	If so, how many	Type/weight		
Name, address and phone # of Next of Kin_	·			

INSURANCE DISCLOSURE

The Owner of the unit you are applying for carries insurance on the building only. Neither the Agent nor the Owner of the property is responsible for damage to your personal property. Owner and Agent recommend to Lessee/Tenant that they obtain Renters Insurance to protect their personal property and liability as an occupant of the premises and provide a certificate of insurance to the Owner/Agent. The prospect Lessee/Tenant acknowledges this recommendation and ______ will or _____ will not obtain Renters Insurance. If Renters Insurance is obtained for this property, please update this application by providing below the name of company, agent, agent phone, and policy #.

Megan's Law Disclosure: Lessee(s) should exercise whatever due diligence they deem necessary with respect to information on any sexual offenders registered under Chapter 23 (§ 19.2-387 et seq.) of Title 19.2 whether the owner proceeds under subdivision 1 or 2 of subsection A of § 55-519. Such information may be obtained by contacting your local police department or the Department of State Police, Central Criminal Records Exchange, at 804-674-2000 or <u>http-offender.usp.state.va.us</u>.

Lead Based Paint Warning Statement: The United States Environmental Protection Agency (EPA) and the Department of Housing and Urban Development (HUD) have determined that properties built prior to 1978 may contain lead-based paint which can cause serious health problems. The property ______ was _____ was not built prior to 1978.

Lessee hereby acknowledges that Lessor, or and Licensed Broker or Salesperson employed by or affiliated with Lessor, and any Manager employed by Lessor, are Agents of the Owner of the property. Lessee further acknowledges that Lessor as required by applicable Virginia Law has made full disclosure of the Agency relationship. ______Owner(s) of the property for lease is (are) a Licensed Virginia Real Estate Broker or Agent.

All questions must be answered in full. If any Applicant withholds or gives false information, the Owner may terminate this Application and the lease agreement. In the event the Lessee fails to enter into and occupy the premises at the time set forth in effective lease, the Lessor shall retain sums equal to the expenses and damages incurred and furnish lessee with an itemized list of same.

Applicant(s) have read the information contained in this application and certify that the information is true and accurate to the best of the Applicant(s) knowledge. The Owner and Agent have each Applicant's permission to investigate the credit record and verify employment, income, references, and all other information regarding each Applicant.

Applicant's Signature

Spouse's Signature

_ Date___ Date