Mail: CENTIS Properties, LLC

Email: rent@centisproperties.com P.O. Box 1869, Midlothian, VA 23113-1869

<u>Welcome</u>

We appreciate your interest in one of our communities. Before filling out the attached application we would like to share information about CENTIS Properties, LLC.

- We want all of our tenants to have a safe and comfortable community to live in. We provide increased lighting in our park, park curfew and increased patrol by local authorities.
- We encourage our tenants to look out for one another and promote a sense of community.
- We have a thorough screening process for all applicants including a criminal background check.

Please review our list of criteria. If you feel you meet the criteria, then we welcome you to apply. We provide equal housing opportunity.

- 1) An application is required for <u>EACH</u> adult who will be residing at the residence (18 yrs and older)
- 2) We require **copy of photo ID** (driver's license or other government-issued photo ID)
- 3) Rental history must be verified by unbiased sources (no relatives)
- 4) Section 8 applicants must allow information access (we must be able to verify information regarding rental history from local public housing agency)
- 5) No **drug or gang** activity is permitted on the premises nor is any other type of illegal activity or behavior.
- 6) We must be able to verify independently the amount and stability of your income through sources such as pay stubs, employer/source contact or through tax records. If self-employed, you will need to submit a business license, tax records, bank records or client references. Income should be 2.5 times the monthly rent.
- 7) Tenants are responsible for their conduct and that of their guests while on the property
- 8) No Tenant or their guest will be allowed to interfere with the peace of the other tenants or the community.
- 9) NO Pets allowed.

Fax & Phone: 1-866-563-8777

10) Additional information may be viewed at www.centisproperties.com

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Monthly Income:

Email: rent@centisproperties.com

Supervisor: ____

Application Date: Unit Address: PERSONAL DATA Full legal name: ___ _____ Date of Birth: _____ First Middle Phone #: _____ Email: ____ SSN: _____ Driver License #:____ Expiration Date: ___/__/ Lease in your name? Yes, liable for lease agreement No, applying as an approved resident only. CURRENT ADDRESS (include zip code): Landlord Name: _____ Landlord Phone: _____ Reason for Moving: _____ When did you move in? ____yes ___no Do you rent this residence? ____yes _ no Is your name on the lease? ___yes no Have you given written notice to leave? PREVIOUS ADDRESS (include zip code): Landlord Name: _____ Landlord Phone: _____ Reason for Moving: When did you move in? _____ out? _____ Did you rent this residence? yes no ____yes no Was your name on the lease? Did you give written notice to leave? yes no **CURRENT EMPLOYMENT / INCOME:** Name of Employer: Your position: Start date: _____ Address: _____ City: _____ State: ____ Zip: _____ Employer's Phone: _____ Supervisor: Monthly Income: <u>PREVIOUS EMPLOYMENT:</u> (if current employment is less than 6 months) Your position: _____ Name of Employer: Address: _____ Start date: _____ City: _____ State: ____ Zip: _____ Employer's Phone:

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| PERSONAL HISTORY | <u>'.</u> | | | | |
|--|---|-------|-------|--------------|--|
| Have you EVER? Declared bankruptcy? | | yes _ | no | | |
| Been asked to move ou | yes _ | | | | |
| Broken a rental agreem | yes _ | no | | | |
| Been sued for nonpayn | yes _ | no | | | |
| Been sued for damage | yes _ | no | | | |
| Been convicted of a fel - If yes to any question | yes _ | | | | |
| What states have you li | ived in: | | | | |
| YOUR VEHICLE: | | | | | |
| | Model: | | Year: | | |
| | License Plate: | | | | |
| | <u>:</u> (18 yrs. and older must comple | | • | | |
| Relationship: | | | | | |
| Name: | Date of Birth: | | SSN: | | |
| Relationship: | | | | | |
| Name: | Date of Birth: | | SSN: | | |
| Relationship: | | | | | |
| Name: | Date of Birth: | | SSN: | | |
| Relationship: | | | | | |
| EMERGENCY CONTA | <u>CT:</u> | | | | |
| Name: | | | | | |
| | | | | Relationship | |
| to Applicant: | | | | | |

By signing the application, you grant us permission to communicate with the contact listed in this section in the event we can't locate you.

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| APPLICANT REFERENCES: (no | relatives or friend | ds) | | | |
|---|---|--|---|---|----------------------------------|
| Name: | _Phone #: | | | | |
| Relationship: | | | | | |
| Name: | _ Phone #: | | | | |
| Relationship: | | | | | |
| Do you have any pets?NC | YES | | | | |
| All reque | ested information | on must be comp | leted | | |
| Agreement & Authorizat | tion Signatu | re: | | | |
| I hereby state and represent accurate. I understand that in the Landlord if any of the information on the application in the application will be retained about me, including, but not litenant history, any court recording information to them. | the event a lead tion provided in te the Landlon Verification or ed by Landlord mited to, this a ds and/or my o | se is entered into n the application rd or the Landle re-verification of l. I authorize Lan application, my e criminal record, a | it may be is mater ord's age f any inford to employme | e cancelled by ially inaccuratents to verify rmation conta obtain informatent, my crediteby authorize | the te or the ined ation, my and |
| I understand that this is an a agreement in whole or part. | pplication only | and does not o | onstitute | a rental or le | ease |
| Applicant (Print Name) | | | | | |
| Applicant (Signature) | | | | | |
| | | | | | |

Do you know of anyone else who may be interested in renting from us? We offer a referral reward program!

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APPLICANT'S AUTHORIZATION TO RELEASE RECORDS

CENTIS Properties, LLC

P.O. Box 1869 Midlothian, VA 23113-1869 1-866-563-8777

| 10: | | | | |
|---|--|--|---|------------------------------------|
| | [NAME OF BUSINESS OR INSTITUTION | N WHERE INFORM | MATION IS REQUEST | ED] |
| l, | , AUTHO | | <u>FIS Properties, LLC</u> ANDLORD | |
| RESIDEN APPLICA RECORD PRIVILE | ABLE TO OBTAIN ANY PERTINENCE INFORMATION AS IS NECESTATION FOR RESIDENCY. I HERE TO THE LANDLORD NAMED AS EGES WITH RESPECT TO ANY INDICATE OF ABOVE. | SSARY IN CONJ EBY AUTHORIZI ABOVE. I EXPRE | UNCTION WITH ME THE RELEASE SSLY AGREE TO | Y PENDING OF THOSE WAIVE ANY |
| APPLICA | ANT SIGNATURE: | | | |
| DATE: | | | | |