



# RENTAL APPLICATION



1 FAIR HOUSING Nevada strictly abides by the Federal Fair Housing Act, Nevada Fair Housing Law and principles of  
 2 equal opportunity. It is strictly prohibited to discriminate on the basis of race, religious creed, color, national origin,  
 3 disability, sexual orientation, gender identity or expression, ancestry, familial status or sex.

4  
 5 APPLICANTS The application fee is \$ \_\_\_\_\_ per \_\_\_\_\_.

6 Fee must be paid by  cash,  cashier's check  money order  debit/credit card.

7 Any fee charged by employer to verify employment must be paid by the applicant in advance. Fees are non-refundable, and  
 8 must be paid separately from any security deposits or pet fees.

9  
 10 CREDIT CRITERIA, PROOF OF INCOME AND IDENTIFICATION Please attach the following to upon making  
 11 application:

12  Copies of last two (2) most recent paycheck stubs.

13  Copy of last year's income tax return

14  Copies of last three (3) months bank statements

15  Proof of Other Income (SIIS, child support, etc.)

16  Copy of driver's license, military ID or state ID

17  Other \_\_\_\_\_

18  Other \_\_\_\_\_

19  Other \_\_\_\_\_

20  Other \_\_\_\_\_

21

22 WHEN YOUR APPLICATION IS COMPLETE Please submit Rental Application, processing fees, credit criteria, proof  
 23 of income and identification to \_\_\_\_\_.

24 Incomplete Rental Applications will not be processed.

25

26 Additional Information Requested:

27

28

29

30

31

32 Please allow 3 days to process applications. For questions or concerns regarding the Rental Application please  
 33 contact the Licensee below.

34

35 Managing Brokerage dwellNV B.1001895 Managing Licensee Michelle M Ward PM.0167397.BKR

36

37 Address \_\_\_\_\_ Contact Phone: \_\_\_\_\_

38

39 City, State, Zip: \_\_\_\_\_ Email Address: michelle@dwellNV.com

Property Address: \_\_\_\_\_

Applicant Initials [ \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ ]

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# APPLICANT



1 Application will not be accepted if received without being initialed and signed by applicant. Please use additional applications  
2 if more than two persons are applying.

3  
4 Applicant hereby makes this request to rent the following property under the following terms and conditions:

5  
6 Requested Move In Date: \_\_\_\_\_  
7 Property Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

8 (Non-Refundable) Application Fee \$ \_\_\_\_\_ Rent \$ \_\_\_\_\_ Security Deposit \$ \_\_\_\_\_

9 (Non-Refundable) Processing Fee \$ \_\_\_\_\_ Key Fee \$ \_\_\_\_\_ Pet Deposit \$ \_\_\_\_\_

10 Cleaning Fee \$ \_\_\_\_\_ Other \$ \_\_\_\_\_

11 Evidenced by:  Cash  Check  Cashiers Check  Money Order

12  
13 Applicant Name \_\_\_\_\_ Birth Date \_\_\_\_\_

14 Social Security Number \_\_\_\_\_ Drivers License \_\_\_\_\_ State \_\_\_\_\_

15 Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

16 Work Phone \_\_\_\_\_ Email \_\_\_\_\_

17  
18 Current Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

19  Owned  Rent Payment \$ \_\_\_\_\_ How Long? \_\_\_\_\_

20 Landlord Name/Mortgage Holder \_\_\_\_\_ Phone \_\_\_\_\_

21 Reason for leaving: \_\_\_\_\_

22 *If less than 3 Years*

23 Prior Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

24  Owned  Rent Payment \$ \_\_\_\_\_ How Long? \_\_\_\_\_

25 Landlord Name/Mortgage Holder \_\_\_\_\_ Phone \_\_\_\_\_

26 Reason for leaving \_\_\_\_\_

27  
28 Current Employer \_\_\_\_\_ Employed as \_\_\_\_\_ How Long? \_\_\_\_\_

29 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

30 Phone \_\_\_\_\_ Fax \_\_\_\_\_

31 Salary \$ \_\_\_\_\_ Per/Mo \_\_\_\_\_ Supervisor \_\_\_\_\_

32 Other Income Source \_\_\_\_\_ Amount \$ \_\_\_\_\_

33 *If less than 3 Years*

34 Prior Employer \_\_\_\_\_ Employed as \_\_\_\_\_ How Long? \_\_\_\_\_

35 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

36 Phone \_\_\_\_\_ Fax \_\_\_\_\_

37 Salary \$ \_\_\_\_\_ Per/Mo \_\_\_\_\_ Supervisor \_\_\_\_\_

38  
39 Monthly Obligations Total \$ \_\_\_\_\_

40 Auto Loan \$ \_\_\_\_\_ Auto Insurance \$ \_\_\_\_\_

41 Health Insurance \$ \_\_\_\_\_ Child Support \$ \_\_\_\_\_

42 Credit Card \$ \_\_\_\_\_ Credit Card \$ \_\_\_\_\_

43 Other \$ \_\_\_\_\_ Other \$ \_\_\_\_\_

44  
45 How long will Applicant live here? \_\_\_\_\_ Does anyone in the household smoke?  Yes  No

46  
47 Applicant Emergency Contact Name \_\_\_\_\_ Relationship \_\_\_\_\_

48 Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

49 Other Phone \_\_\_\_\_

50 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Property Address: \_\_\_\_\_



# CO-APPLICANT



1 Co-Applicant Name \_\_\_\_\_ Birth Date \_\_\_\_\_  
 2 Social Security Number \_\_\_\_\_ Drivers License \_\_\_\_\_ State \_\_\_\_\_  
 3 Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
 4 Work Phone \_\_\_\_\_ Email \_\_\_\_\_  
 5 \_\_\_\_\_  
 6 Current Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 7  Owned  Rent Payment \$ \_\_\_\_\_ How Long? \_\_\_\_\_  
 8 Landlord Name/Mortgage Holder \_\_\_\_\_ Phone \_\_\_\_\_  
 9 Reason for leaving: \_\_\_\_\_  
 10 *If less than 3 Years*  
 11 Prior Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 12  Owned  Rent Payment \$ \_\_\_\_\_ How Long? \_\_\_\_\_  
 13 Landlord Name/Mortgage Holder \_\_\_\_\_ Phone \_\_\_\_\_  
 14 Reason for leaving \_\_\_\_\_  
 15 \_\_\_\_\_  
 16 Current Employer \_\_\_\_\_ Employed as \_\_\_\_\_ How Long? \_\_\_\_\_  
 17 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 18 Phone \_\_\_\_\_ Fax \_\_\_\_\_  
 19 Salary \$ \_\_\_\_\_ Per/Mo \_\_\_\_\_ Supervisor \_\_\_\_\_  
 20 Other Income Source \_\_\_\_\_ Amount \$ \_\_\_\_\_  
 21 *If less than 3 Years*  
 22 Prior Employer \_\_\_\_\_ Employed as \_\_\_\_\_ How Long? \_\_\_\_\_  
 23 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 24 Phone \_\_\_\_\_ Fax \_\_\_\_\_  
 25 Salary \$ \_\_\_\_\_ Per/Mo \_\_\_\_\_ Supervisor \_\_\_\_\_  
 26 \_\_\_\_\_  
 27 Monthly Obligations Total \$ \_\_\_\_\_  
 28 Auto Loan \$ \_\_\_\_\_ Auto Insurance \$ \_\_\_\_\_  
 29 Health Insurance \$ \_\_\_\_\_ Child Support \$ \_\_\_\_\_  
 30 Credit Card \$ \_\_\_\_\_ Credit Card \$ \_\_\_\_\_  
 31 Other \$ \_\_\_\_\_ Other \$ \_\_\_\_\_  
 32 \_\_\_\_\_  
 33 How long will Applicant live here? \_\_\_\_\_ Does anyone in the household smoke?  Yes  No  
 34 \_\_\_\_\_  
 35 Co-Applicant Emergency Contact Name \_\_\_\_\_ Relationship \_\_\_\_\_  
 36 Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
 37 Other Phone \_\_\_\_\_  
 38 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Property Address: \_\_\_\_\_



# GENERAL QUESTIONNAIRE



1 How did you hear about this property? \_\_\_\_\_  
 2 Please explain why you are moving from your current location? \_\_\_\_\_  
 3 \_\_\_\_\_  
 4 Has any Applicant ever had recurring problems with current apartment or landlord?  Yes  No If yes, please explain:  
 5 \_\_\_\_\_  
 6 \_\_\_\_\_  
 7 Has any Applicant ever been served a late rent notice?  Yes  No If yes, please explain:  
 8 \_\_\_\_\_  
 9 \_\_\_\_\_  
 10 Has any Applicant ever willfully refused to pay rent when due?  Yes  No If yes, please explain:  
 11 \_\_\_\_\_  
 12 \_\_\_\_\_  
 13 Has any Applicant ever been evicted?  Yes  No If yes, please explain:  
 14 \_\_\_\_\_  
 15 \_\_\_\_\_  
 16 Has any Applicant ever filed bankruptcy?  Yes  No If yes, please explain:  
 17 \_\_\_\_\_  
 18 \_\_\_\_\_  
 19 Has any Applicant been a party to a lawsuit?  Yes  No If yes, please explain:  
 20 \_\_\_\_\_  
 21 \_\_\_\_\_  
 22 Has any applicant or occupant ever been convicted of a gross misdemeanor or felony?  Yes  No If yes, please explain:  
 23 \_\_\_\_\_  
 24 \_\_\_\_\_  
 25 Is any applicant or occupant required to register or has been convicted as a sex offender?  Yes  No If yes, please  
 26 explain: \_\_\_\_\_  
 27 We may run a credit check and a criminal background check. Is there anything negative we will find that you want to  
 28 comment on? \_\_\_\_\_  
 29 \_\_\_\_\_  
 30 \_\_\_\_\_  
 31 Does any Applicant plan to use liquid filled furniture?  Yes  No Furniture type \_\_\_\_\_  
 32 \_\_\_\_\_  
 33 Do you have Pets?  Yes  No If Yes, type of pet: \_\_\_\_\_  
 34 Contact Licensee for Pet Application.  
 35 \_\_\_\_\_  
 36 In addition to Applicant(s), other persons to be at premises:  
 37 Name: \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_ Occupation \_\_\_\_\_  
 38 Name: \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_ Occupation \_\_\_\_\_  
 39 Name: \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_ Occupation \_\_\_\_\_  
 40 Name: \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_ Occupation \_\_\_\_\_  
 41 \_\_\_\_\_  
 42 Vehicles  
 43 Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_  
 44 Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_  
 45 Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_  
 46 Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ License # \_\_\_\_\_ State \_\_\_\_\_

Property Address: \_\_\_\_\_



# VERIFICATION OF EMPLOYMENT



1 EMPLOYER CONTACT INFORMATION

2

3 Applicant Name: \_\_\_\_\_

4

5 Company Name: \_\_\_\_\_ Address: \_\_\_\_\_

6

7 Supervisor: \_\_\_\_\_ Email: \_\_\_\_\_

8

9 Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

10

11 Applicant authorizes verification of employment.

12

13 Applicant Signature: \_\_\_\_\_ Date : \_\_\_\_\_

14

15

16

17

**EMPLOYER ONLY BELOW THIS LINE**

18

**To Whom it May Concern:**

19

20 One of your employees (named above) has applied to rent one of our properties. Please verify the following  
21 information below. See authorization attached.

22

Date of Employment

23

24 Hired Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_

25

26 Employee is paid: Hourly \$ \_\_\_\_\_ Salary \$ \_\_\_\_\_

27

28 Hours per week: \_\_\_\_\_

29

30 Frequency:  Weekly  Bi-Weekly  Monthly

31

32

33 Supervisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

34

35

**Please return complete form to:**

36

37 Managing Brokerage: dwellNV B.1001895 Managing Licensee Michelle M Ward PM.0167397.B

38

39 Phone: \_\_\_\_\_ Fax : \_\_\_\_\_

40

Address : \_\_\_\_\_ City State Zip: \_\_\_\_\_

41

Email: michelle@dwellNV.com

42

Property Address: \_\_\_\_\_

Applicant Initials [ \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ ]



# VERIFICATION OF RENTAL HISTORY



1 Applicant Name: \_\_\_\_\_  
 2 Name of Landlord/Property Manager: \_\_\_\_\_  
 3 Previous/Current Rental Address: \_\_\_\_\_  
 4 Management Phone Number: \_\_\_\_\_  
 5 Management Fax Number: \_\_\_\_\_

6  
 7 **Applicant authorizes verification of rental history.**  
 8

9 Applicant Signature: \_\_\_\_\_ Date : \_\_\_\_\_

10  
 11  
 12 **LANDLORD ONLY BELOW THIS LINE**

13  
 14  
 15 **To Whom it May Concern:**

16 One of your tenants (named above) has applied to rent one of our properties. Please verify the following  
 17 information below. See authorization attached.

18  
 19 Tenant Occupied the above property from \_\_\_\_\_ to \_\_\_\_\_

20 Any late rent payments?  No  Yes If yes, how many? \_\_\_\_\_

21 Any NSF?  No  Yes If yes, how many? \_\_\_\_\_

22 Deposit refunded?  No  Yes Comments: \_\_\_\_\_

23 Was proper notice to vacate given?  No  Yes Comments: \_\_\_\_\_

24  
 25 Condition property left in:  Excellent  Good  Fair  Poor Comments: \_\_\_\_\_

26  
 27 Did the tenant have any pets?  No  Yes What kind? \_\_\_\_\_

28 Would you rent to the Tenant again?  No  Yes

29 Other comments:  
 30  
 31  
 32

33 Landlord/Manager Signature: \_\_\_\_\_ Date: \_\_\_\_\_

34  
 35  
 36  
 37  
 38 **Please return complete form to:**

39 Managing Brokerage: dwellNV B.1001895 Managing Licensee Michelle M Ward PM.0167397.

40 Phone: \_\_\_\_\_ Fax : \_\_\_\_\_

41 Address : \_\_\_\_\_ City State Zip: \_\_\_\_\_

42 Email: michelle@dwellNV.com

Property Address: \_\_\_\_\_



# APPLICANT AGREEMENT AND AUTHORIZATION



1 **A.** Applicant declares that the information provided is true and accurate. Applicant authorizes verification of employment,  
2 criminal records, credit, verification of references and current and previous landlords.

3 **B.** Applicant understands and acknowledges, that a false statement made on this application are grounds for denial of  
4 rental to Applicant. Any statement on this application may be construed as a condition precedent to any binding rental  
5 agreement or contract between Applicant and landlord.

6 The Applicant and Managing Brokerage understand and agree the Managing Broker is required to implement and  
7 maintain reasonable security measures to protect the personal information of the Applicant from unauthorized access,  
8 acquisition, destruction, use, modification or disclosure.

9 **D.** Landlord and Licensee will not be bound by any representations, agreements or promises, written or oral, made by  
10 landlord or Licensee unless contained in the Rental Agreement signed by landlord or landlord's Licensee.

11 **E.** Applicant understands that Applicant acquires no rights to premises until execution of a Rental Agreement and deposit  
12 of rent and security deposit.

13 **F.** Applicant understand that \_\_\_\_\_ is the leasing Licensee and representative for the  
14 landlord of the premises located at \_\_\_\_\_.

15 **G.** Applicant agrees to execute a Rental Agreement within \_\_\_\_\_ business days after being notified of acceptance of this  
16 Application.

17  
18 I understand that any discrepancy or lack of information may result in the rejection of this application and that this is an  
19 application for an apartment/home and does not constitute a rental or lease agreement in whole or part.

20  
21 APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

22  
23 CO-APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

24  
25 CO-APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

26  
27 CO-APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

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