`

***The property will be shown and made available to all persons without regard to race, color, creed, religion, national origin, sex, familiar status, handicap, or elderliness in compliance with all applicable federal and state and local fair housing laws and regulations.***

This application for Lease, is made on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_ between Homes 4U VA, LLC (Manager for Owner) and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(**Applicant or Tenant**) / and / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(**Co-Applicant or Co-Tenant**) with interest in the Property at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ in the City/County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Zip Code)\_\_\_\_\_\_\_\_\_\_\_\_ for occupancy commencing on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ at a weekly\_\_\_/bi-weekly\_\_\_/monthly\_\_\_ rate of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to paid in accordance with lease.

**(START HERE)**

PLEASE FILL IN ALL INFORMATION COMPLETELY

**(1st Applicant)**

# 1. Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SSN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel# (H):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel # (W): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Present Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Years: \_\_\_\_\_\_\_\_\_\_

 **(Street, City, State, Zip)**

**EMAIL ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

## Landlord: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Landlord’s Telephone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(REASON FOR LEAVING) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**

## Have you ever called the city on a landlord \_\_\_\_\_\_\_\_ yes \_\_\_\_\_\_\_\_\_\_no?

**Have you ever had your rent payments sent to the courts for a property if yes please explain\_\_\_\_ yes or no \_\_\_\_?**

**How many people will be occupying your home? \_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age\_\_\_\_\_\_\_.**

 **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age\_\_\_\_\_\_\_\_**

 **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age\_\_\_\_\_\_\_\_**

 **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age\_\_\_\_\_\_\_\_**

 **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age\_\_\_\_\_\_\_\_**

 **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Age\_\_\_\_\_\_\_\_**

## (Previous Address): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Years: \_\_\_\_\_\_\_\_\_\_

 **(Street, City, State, Zip)**

## ( Previous landlord): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Landlord’s Telephone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Presently Employed By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ How Long? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zipcode\_\_\_\_\_\_\_\_\_\_

## Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Salary $\_\_\_\_\_\_\_\_\_\_ (Wk., Mo., Yr) Supervisor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Telephone # to Current Employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Best Time to Call \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## 2ND JOB: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_How Long?-\_\_\_\_\_\_\_\_ Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/#\_\_\_\_\_\_\_\_\_

# (2nd Applicant)

# 2. Co-Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SSN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_

## Tel # (H): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel # (W): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Present Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Years: \_\_\_\_\_\_\_\_\_\_

**(Street, City, State, Zip)**

##  Present landlord: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Landlord’s Telephone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 EMAIL ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## (Previous Address): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Years: \_\_\_\_\_\_\_\_\_\_

**(Street, City, State, Zip)**

## (Previous landlord): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Landlord’s Telephone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Presently Employed By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ How Long? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Zipcode\_\_\_\_\_\_\_\_

## Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Salary $\_\_\_\_\_\_\_\_\_\_ (Wk., Mo., Yr) Supervisor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Telephone # to Current Employer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Best Time to Call \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## 2ND JOB: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_How Long?-\_\_\_\_\_\_\_\_ Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/#\_\_\_\_\_\_\_\_\_\_\_

**3. Emergency contact/References: References must have working #’s**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_ \ #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\ #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\ #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# 4. Number of Vehicles: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ License Plate #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5. Pets: Kind: \_\_\_\_\_\_\_\_ Type: \_\_\_\_\_\_\_\_\_\_\_ Color: \_\_\_\_\_\_\_ Weight: \_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_**

**6. Are you presently in the Armed Services \_\_\_\_\_ Yes \_\_\_\_\_\_ No**

## If yes, answer the following

**Applicant Co-Applicant**

**Rank: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rank: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Serial No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Serial No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Outfit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Outfit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**7. Other Income:**

**Applicant: Co-Applicant**

**Amount $\_\_\_\_\_\_/\_\_ Source: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount $\_\_\_\_\_\_\_/\_\_ Source: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**8. For further proof of financial verification please provided the following below:**

|  |  |  |  |
| --- | --- | --- | --- |
| **BANK** | **ACCT NO.** | **CHECKING/SAVING** | **SOCIAL SECURITY/DIRECT DEPOSIT** |
|  |  |  |  |
|  |  |  |  |

**Applicant should exercise whatever due diligence Applicant deems necessary with respect to information on any sexual offenders registered under Chapter 23 (sec. 19.2-387 et seq.) of Title 19. Such information may be obtained by contacting your local police department or the Department of State Police, Central Records Exchange at (804) 674-2000 or** [**www.state.va.us/vsp/vsp.html**](http://www.state.va.us/vsp/vsp.html)

**The Applicant(s) hereby certifies that the information contained in this Application for Lease is true and correct to the best of the Applicant(s)’s knowledge and belief.**

## Applicant/Co-Applicant herby authorizes:

* Agent/Owner to conduct a credit check of Applicant and Co-Applicant.
* Agent/Owner to process appropriate background checks on Applicant and Co-Applicant.
* Agent/Owner to verify all information provided herein by Applicant and Co-Applicant.

## I/We have read the terms and conditions of this Application for Lease.

**SIGNATURE OF APPLICANT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_\_**

**SIGNATURE OF CO-APPLICANT \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_\_**

**\*\*Please note Homes 4U VA, LLC**

## Does not hold Security Deposits all deposits are given to your Property owner

## Thus all refund of security deposits will be given by the Owner.

## Sign\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_.

## Sign\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_.

### (APARTMENTS ONLY)

**\*\*\*Please note the unit that you were shown may or may not be the one that the landlord makes available for you to rent.**

**\*\*\* YOUR UTILITIES MUST BE TURNED ON AT LEAST 2 DAYS PRIOR TO YOUR MOVE-IN. (Intl)\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_.**

### DO NOT WRITE BELOW THIS LINE

**- - -- - - - - -- - - - - - - - -- - - - - -- - -- - -- - - - -- - - -- - - -- - --- - - -- - -- - - - -- - - -- - - -- - -- - - -- - - - - - - - - -**

## For use by Agent/Owner Only:

**TYPE OF IDENTIFICATION \_\_\_\_\_\_\_\_\_\_\_\_\_ EXPIRATION DATE\_\_\_\_\_\_\_\_\_\_\_\_ License Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Applicant) License Plate #\_\_\_\_\_\_\_\_\_\_\_\_\_**

**TYPE OF INDENTIFICATION\_\_\_\_\_\_\_\_\_\_\_\_ EXPIRATION DATE\_\_\_\_\_\_\_\_\_\_\_\_**

## License Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Co-applicant) License Plate #\_\_\_\_\_\_\_\_\_\_\_

**The undersigned acknowledges receipt from Applicant(s) the sum of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_by cash, personal check, or money order payable to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, to be applied as an application fee (non-refundable) in the amount of $\_\_\_\_\_\_\_\_\_\_, a security deposit in the amount of $\_\_\_\_\_\_\_\_\_\_\_, first \_\_\_\_\_\_\_\_\_\_\_ rental in the amount of $\_\_\_\_\_\_\_\_\_\_\_\_\_\_. The Applicant(s) next due date is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_.**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_/\_\_\_/\_\_\_**

## Signature of Recipient (Agent/Owner)

## This Application for Lease is hereby ACCEPTED as of the \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_

**Application \_\_\_\_\_\_\_\_Approved for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ or \_\_\_\_\_\_\_\_\_Denied**

 **(Property Address and Room #)**

## Denied due to:

**\_\_\_\_Credit Check \_\_\_\_Background Check \_\_\_\_\_Reference Check \_\_\_\_Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

We are located @

##### 200 E. Pilkington st. Richmond VA 23224 Office 804-232-6568 / FAX 1-800-886-8821