

and regulations.



## VIRGINIA ASSOCIATION OF REALTORS® APPLICATION FOR LEASE

(This is a legally binding contact. If not understood, seek competent advice before signing.)

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

he	is Application for Lease					
anı	<u> </u>				licant or Tenant, who	ther one or more: Landlord)
	ough			(Lis	ing Broker or Agen	1, who represent
La	ndiord), and					er, who does
OT	does not represent App	olicant).				
Ap	plicant hereby applies for	a residential living (	unit located at			_,Virginia, in the
Cit	y/County ofial monthly rent payment of		for occupancy	commencing on		at a
14633	nai monuny tent payment t		1001	iais (a		
		PLEASE FILL IN	I ALL INFORM	ATION COMPLE	ETELY	
1.	Applicant:		SSN:		Date of Birth:	
	Tel # (H):	Tel # (W);		Cell Phone #:	Email:	
	Present Address:		Year	rs: Landlord:		
		Street/P.O. B	ox			
				Landlord's Tel	#:	
	City	State	Zip	*		
	Previous Address:		Ye	ars: Landlord	1:	
		Street/P.O. B	ox			
				Landlord's Tel	#:	
	City	State	Zip			
	Presently Employed By:			How long?		
	Position;		Salany \$	(Wk Mo Vr)	Supervisor:	
				(11.11)	oup.rr.borr	
	Telephone:					
	Formerly Employed By:		How	long?	Supervisor:	
2	Co-Applicant:		SSN:		Date of Birth:	
	Tel # (H):	Tel # (W):	C	ell Phone #:	Email:	
	Present Address:		Year	s: Landlord:		
		Street/P O B				



	City					lord's Tel #:		
	City		State	Zip				
Previous	Address:				Years:	Landlord:		
			Street/P.O. Bo	x				
0''		Landlord's Tel #:						
	City		State	Zip				
Co-Appli	Co-Applicant Employed By:		How long?					
Position:			Salary \$	-1	Supervisor:		Telephone:	
Other Occ	cupants:	Name:			Age;	Relationship	p:	
		Name:			Age:	Relationshi	p:	
		Name:			Age:	Relationshi	p:	
Number of	f Vehicles	:						
Pets:	Kind:					Weight:	Name:	
	Other:							
If you are	Other: How Many: JD TAG#:  If you are presently in Armed Services, state:							
			Semilces states					
Applicant	presently i	III ATINOG S	ociviocs, state.		Co-Applicant			
Applicant			or vious, state.					
Applicant					Rank:			
Applicant Rank: Serial No.:					Rank:			
Applicant  Rank:  Serial No.:  Outfit:					Rank: Serial No.:			
Applicant Rank: Serial No.: Outfit: Telephone: Other Incom	·				Rank: Serial No.:			
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Applicant Rank: Serial No.: Outfit: Telephone: Other Incol Applicant Amount \$_	:me:				Rank: Serial No.: Outfit: Telephone:			
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CHECKING ACCOUNT NO.	BANK		ADDRESS		
SAVINGS ACCOUNT NO.	BANK		ADDRESS		
AUTOMOBILE: MAKE YR.	MODEL	FINANCED BY AND	MO BANATAT	Theory or #	
		ADDRESS	MO. PAYMENT	LICENSE #	
AUTOMOBILE: MAKE YR.	Money				
AUTOMOBILE. MANE TK.	MODEL	FINANCED BY AND ADDRESS	MO. PAYMENT	LICENSE #	
CIRCLE IF YOU OWN: CA		MOTORCYCLE		JCK TRAILER	
Will any person named above Yes		ial smoke detector for deaf o	or hearing impaired?		
n Case of Emergency Notify:	•				
	Name	Address		Phone Relationship	
pon application by Applican ent list. Applicant has been fur proved and Applicant and/or andlord's standard lease agreemises, Applicant agrees to gent reserves the right to mal expenses as allowed by applicant SCLOSURE OF BROKERA insaction contemplated by the roker and its salespersons repency, a separate consent agreement.	refished a copy or Guarantor, if sement and beg pay Landlord' ke all appropriable Virginia la AGE RELATION AGE APPlication present Landlor sement has been TORY:	required, fails to execute a tin paying rent on the date s is actual expenses and dama ate deductions from the depaw.  ONSHIP: Landlord and Apply, the Listing Broker and its are defeated or Applicant.	se agreement to review lease agreement in sub pecified in this Applications up to the full amore osit to recover the Landricant confirm that in salespersons represent	v. If this application is estantially the form of ation for occupancy of the unt of the security deposit. Idlord's actual damages and connection with the	
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Name of Guarantor:	Relationship:
Address:	
Phone Number:	
Applicant should exercise whatever due diligence Applicant de offenders registered under Chapter 23 (sec. 19.2-387 et seq.) o your local police department or the Department of State Police www.state.va.us/vsp/vsp.html.	f Title 19. Such information may be obtained by contacting
The Applicant hereby certifies that the information contained i Applicant's knowledge and belief. Applicant hereby authorize an appropriate background check to verify information provide Application.	es Listing Broker to conduct a credit check on Applicant and
We have read the terms and conditions of this Application for lapart from the Lease Agreement.	Lease. We understand this is a binding contract separate and
SIGNATURE OF APPLICANT	/ /
	/
OLONIA THERE OF A DRI LOANET	
SIGNATURE OF APPLICANT	Date
SIGNATURE OF GUARANTOR	/_/ Date
	Date
TYPE OF IDENTIFICATION	
The undersigned acknowledges receipt from Applicant of the payable to, which am	by cash or personal check count consists of an application fee in the amount of the am
and a security deposit in the	he amount of \$
Signature of Reci	pient Date Received
This Application for Lease is hereby ACCEPTED as of the	day of
	Signature of Landlord or Listing Broker
Leasing Broker's Address	
Phone no Cell phone or pager no	Email;
Broker's Code:	

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