



Application fee is \$15.00 for each adult



VIRGINIA ASSOCIATION OF REALTORS®
APPLICATION FOR LEASE

(This is a legally binding contract. 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, familial status, handicap, or elderliness in compliance with all applicable federal and state and local fair housing laws and regulations.

This Application for Lease (the "Application") is made as of the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ by and between \_\_\_\_\_ ("Applicant", whether one or more) and \_\_\_\_\_ ("Landlord") through Norma Stein, Inc. ("Listing Broker" or "Agent," who represents Landlord), and Norma Stein, Inc. ("Leasing Broker," who does \_\_\_ or does not X represent Applicant).

Applicant hereby applies for a residential living unit (the "Premises") located at \_\_\_\_\_, Virginia, in the City/County of \_\_\_\_\_, for occupancy commencing on \_\_\_\_\_, at an initial monthly rent payment of \_\_\_\_\_ Dollars (\$ \_\_\_\_\_).

PLEASE FILL IN ALL INFORMATION COMPLETELY

1. Applicant: \_\_\_\_\_ SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Email: \_\_\_\_\_

Present Address: \_\_\_\_\_ Years: \_\_\_\_\_ Landlord: \_\_\_\_\_
Street / P.O. Box
City State Zip
Landlord's Tel #: \_\_\_\_\_

Previous Address: \_\_\_\_\_ Years: \_\_\_\_\_ Landlord: \_\_\_\_\_
Street / P.O. Box
City State Zip
Landlord's Tel #: \_\_\_\_\_

Presently Employed By: \_\_\_\_\_ How long? \_\_\_\_\_

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

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

Formerly Employed By: \_\_\_\_\_ How long? \_\_\_\_\_ Supervisor: \_\_\_\_\_

2. Co-Applicant: \_\_\_\_\_ SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Email: \_\_\_\_\_

Present Address: \_\_\_\_\_ Years: \_\_\_\_\_ Landlord: \_\_\_\_\_
Street / P.O. Box

Landlord's Tel #: \_\_\_\_\_

Previous Address: \_\_\_\_\_  
City State Zip  
Street / P.O. Box Years: \_\_\_\_\_ Landlord: \_\_\_\_\_

Landlord's Tel #: \_\_\_\_\_

Co-Applicant Employed By: \_\_\_\_\_ How long? \_\_\_\_\_  
City State Zip

Position: \_\_\_\_\_ Salary \$ \_\_\_\_\_ Supervisor: \_\_\_\_\_ Telephone: \_\_\_\_\_

3. Other Occupants: Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

4. Number of Vehicles: \_\_\_\_\_

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

Other: \_\_\_\_\_ How Many: \_\_\_\_\_ ID TAG #: \_\_\_\_\_

6. If you are presently in Armed Services, state:

Applicant

Co-Applicant

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

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

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

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

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

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

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

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

7. Other Income:

Applicant

Amount \$ \_\_\_\_\_ Per: \_\_\_\_\_ Source Of: \_\_\_\_\_

Co-Applicant

Amount \$ \_\_\_\_\_ Per: \_\_\_\_\_ Source Of: \_\_\_\_\_

8. Complete and specifically list any debts now outstanding (attach additional sheet if necessary).

CREDITOR	ADDRESS	ACCOUNT NO.	MONTHLY PAYMENT
			\$
			\$
			\$
			\$

CHECKING ACCOUNT NO.	BANK	ADDRESS		
SAVINGS ACCOUNT NO.	BANK	ADDRESS		
AUTOMOBILE: MAKE YR.	MODEL	FINANCED BY AND ADDRESS	MO. PAYMENT	LICENSE #:
AUTOMOBILE: MAKE YR.	MODEL	FINANCED BY AND ADDRESS	MO. PAYMENT	LICENSE #:

9. CHECK IF YOU OWN:  CAMPER  MOTORCYCLE  BOAT  TRUCK  TRAILER

10. In Case of Emergency Notify:

Name	Address	Phone	Relationship
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11. APPLICATION FEE: A non-refundable application fee in the amount of \_\_\_\_\_ accompanies this Application. A deposit of \_\_\_\_\_ accompanies this Application and will become the security deposit provided in the lease agreement upon the commencement of the lease term. A pet deposit of \_\_\_\_\_ is due at the time of execution of the lease agreement.

12. OBLIGATION TO ENTER INTO LEASE; DAMAGES: Upon submission of this Application by Applicant, Agent reserves the right to remove the Premises from the available rent list. If this application is approved and Applicant and/or Guarantor, if required, fails to execute a lease agreement in substantially the form of Landlord's standard lease agreement, a copy of which has been furnished to Applicant, and begin paying rent on the date specified in this Application for occupancy of the Premises, Landlord shall be entitled to retain the security deposit given to Landlord or Agent at the time this Application is submitted as liquidated damages, and not as a penalty.

13. DISCLOSURE OF BROKERAGE RELATIONSHIP: Landlord and Applicant confirm that in connection with the transaction contemplated by this Application, the Listing Broker and its salespersons represent Landlord, and the Leasing Broker and its salespersons represent Landlord \_\_\_ or Applicant \_\_\_. If Listing Broker is engaging in dual or designated agency, a separate consent agreement has been entered into by Listing Broker and Applicant.

14. RENTAL AND CREDIT HISTORY:

(a) Reason for leaving current residence: \_\_\_\_\_

(b) Has any Applicant ever been rejected for tenancy? Yes \_\_\_ ; No \_\_\_ . If yes, please explain: \_\_\_\_\_

(c) Has any Applicant ever refused to pay rent when due, been a defendant in an unlawful detainer action or eviction, or otherwise been sued by a landlord for matters related to a tenancy? If so, please give details, and the status of any pending actions: \_\_\_\_\_

(d) Has any Applicant ever filed for bankruptcy? Yes \_\_\_ ; No \_\_\_ . If so, please give dates of filing and status of case: \_\_\_\_\_

(e) Please give the names and phone numbers of three references:

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

(f) Please provide the following information if the lease will be guaranteed.

Name of Guarantor: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

Name of Guarantor: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

15. **CRIMINAL HISTORY:** Has any Applicant ever been convicted of, pleaded guilty to, or entered a plea of no contest to any felony or any misdemeanor involving a sex offense, moral turpitude, drug distribution, or personal injury in any jurisdiction?  
YES \_\_\_ NO \_\_\_

If the answer is yes, please give all details, including the specific offense(s), date(s), sentence(s) and jurisdiction(s) in which the offenses occurred, as well as any information on the status of any current probation.

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16. **APPLICANT INVESTIGATION:** 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.vsp.state.va.us/](http://www.vsp.state.va.us/).

17. **INFORMATION CORRECT:** Applicant hereby certifies that the information contained in this Application is true and correct to the best of Applicant's knowledge and belief. Applicant hereby authorizes Listing Broker to conduct a credit check on Applicant and an appropriate background check to verify information provided herein by Applicant for approval or rejection of this Application.

We have read the terms and conditions of this Application. We understand this is a binding contract separate and apart from the Lease Agreement.

SIGNATURE OF APPLICANT \_\_\_\_\_ Date \_\_\_\_\_

SIGNATURE OF APPLICANT \_\_\_\_\_ Date \_\_\_\_\_

SIGNATURE OF GUARANTOR \_\_\_\_\_ Date \_\_\_\_\_

SIGNATURE OF GUARANTOR \_\_\_\_\_ Date \_\_\_\_\_

**LISTING BROKER TO VERIFY APPLICANT'S IDENTIFICATION**

TYPE OF IDENTIFICATION \_\_\_\_\_

The undersigned acknowledges receipt from Applicant of the sum of \$ \_\_\_\_\_ payable to \_\_\_\_\_, which amount consists of an application fee in the amount of \$ \_\_\_\_\_ and a security deposit in the amount of \$ \_\_\_\_\_.

\_\_\_\_\_  
Signature of Recipient

\_\_\_\_\_  
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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