

Instanot

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 and regulations.

| | ween | | | (Appli | cant or Tenant, whether one or more |
|------|----------------------------|------------------------|-------------------|------------------|-------------------------------------|
| and | 1 | | | | (Landlord |
| | | | | (Listin | ng Broker or Agent, who represent |
| | does not represent Ap | nligant) | | | (Leasing Broker, who does |
| 01 | does not represent Ap | pilcaint). | | | |
| Λp | plicant hereby applies for | a residential living u | mit located at | | ,Virginia, in th |
| Cit | y/County of | 0 | , for occupancy c | ommencing on | , at an). |
| init | ial monthly rent payment | of | Dolla | urs (\$ |). |
| | | PLEASE FILL IN | ALL INFORMA | TION COMPLET | TELY |
| 1. | Applicant: | | SSN: | | Date of Birth: |
| | Tel # (H): | Tel # (W): | C | ell Phone #: | Email: |
| | Descent Address | | Vaar | u I andlandı | |
| | Present Address: | Street/P.O. B | 1 cars | : Landlord: _ | |
| | | 040041.0.0 | ion. | | |
| | | | | Landlord's Tcl # | 4: |
| | City | State | Zip | | |
| | Previous Address: | | Veo | re: Landlord: | |
| | rievious Address. | Street/P.O. B | | IS Landiord. | |
| | | | | | |
| | | | | Landlord's Tel # | t: |
| | City | State | Zip | | |
| | Presently Employed By: | | | How long? | |
| | Tresentry Employed By. | | | now 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): | Ca | ell l'hone #: | Email: |
| | Present Address: | | Year | : Landlord: _ | |
| | | Street/P.O. B | ox | | |

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| | | | | | | | Landlord | d's Tel #: | |
|----------|---|---|----------|----------------------------------|-----------------|--|-----------------------|------------|-------------|
| | | City | | State | Zip | | | | |
| | Previous A | ddress: | | | | Years: | La | andlord: | |
| | | | | Street/P.O. Bo | x | | | | |
| | | | | | | | Landlord | d's Tel #: | |
| | | City | | State | Zip | | | | |
| | Co-Applic | ant Emple | oyed By: | | | | How | long? | |
| | Position: _ | | | Salary \$ | | Superv | visor: | | _Telephone: |
| | Other Occi | upants: | Name: _ | | | Age: | | Relationsh | ip: |
| | | | Name: | | | Age | : | Relationsh | uip: |
| | | | Name: | | | Age | | Relationsh | nip: |
| | | | | | | | | | |
| | | | | | | | | | |
| | Number of | f Vehicles | : | | | | | | |
| | Number of Pets: | | | | | | | Weight: | Name: |
| | | | | Туре: | (| Color: | | | Name: |
| | Pets: | Kind: _ Other: presently | | Туре: | (Many: | Color: | ID ' | | |
| | Pets: If you are p Applicant | Kind: _ Other: presently | | Type: How | (Many: | Color: | ID ' | | |
| | Pets: If you are p Applicant Rank: | Kind: _ Other: presently | in Armed | Type: How Services, state: | (Many: | Color: Co-App Rank: | ID ' | TAG#: | |
| | Pets: If you are p Applicant Rank: | Kind: _ Other: presently | in Armed | Type: How | (Many: | Color: Co-App Rank: | ID ' licant | TAG#: | |
| i. | Pets: If you are p Applicant Rank: Serial No.: | Kind: _ Other: presently | in Armed | Type: How Services, state: | (Many: : | Color: Co-App Rank: Serial N | ID ' licant | TAG#: | |
| i. | Pets: If you are p Applicant Rank: Serial No.: Outfit: | Kind: _ Other: presently | in Armed | Type: How Services, state: | (Many: : | Color: Co-App Rank: Serial N Outfit: _ | ID ' licant | TAG#: | |
| | Pets: If you are p Applicant Rank: Serial No.: Outfit: | Kind: _ Other: presently | in Armed | Type: How Services, state: | (Many: : | Color: Co-App Rank: Serial N Outfit: _ | ID ' licant | TAG#: | |
| i. | Pets: If you are p Applicant Rank: Serial No.: Outfit: Telephone: Other Inco Applicant | Kind: Other: presently : : | in Armed | Type: How Services, state: | (Many: | Color: Co-Appl Rank: Serial N Outfit: _ Telepho | ID ' licant o.: | TAG#: | |
| ł. 5. | Pets: If you are p Applicant Rank: Serial No.: Outfit: Telephone: Other Inco Applicant | Kind: Other: presently : : | in Armed | Type: How Services, state: | (Many: | Color: Co-App Rank: Serial N Outfit: _ | ID ' licant o.: | TAG#: | |
| i. | Pets: If you are p Applicant Rank: Serial No.: Outfit: Telephone: Other Inco Applicant Amount \$ Co-Applica | Kind: _ Other: presently : me: ant | in Armed | Type: How Services, state: | (Many: | Color: Co-Appl Rank: Serial N Outfit: _ Telepho | ID ' licant o.: | TAG#: | |

COMPLETE AND SPECIFICALLY LIST ANY DEBTS NOW OUTSTANDING (ATTACH ADDITIONAL SHEET IF NECESSRY)

| ADDRESS | ACCOUNT NO. | MONTHLY PAYMENT |
|---------|-------------|---------------------|
| | | \$ |
| | | \$ |
| | | \$ |
| | | \$ |
| | ADDRESS | ADDRESS ACCOUNT NO. |

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| 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 # | |
| CIRCLE IF YOU OWN: C | AMPED | MOTORCYCLE | BOAT TR | | |

Will any person named above require a visual smoke detector for deaf or hearing impaired? Yes ______ No _____

Name

In Case of Emergency Notify: _

Address

Phone Relationship

A non-refundable application fee in the amount of ______must accompany this Application. A deposit of ______must accompany 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.

Upon application by Applicant to become tenants in this residential living unit, Agent will remove the unit from the available rent list. Applicant has been furnished a copy of Landlord's standard lease agreement to review. 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 and begin paying rent on the date specified in this Application for occupancy of the premises, Applicant agrees to pay Landlord's actual expenses and damages up to the full amount of the security deposit. Agent reserves the right to make all appropriate deductions from the deposit to recover the Landlord's actual damages and expenses as allowed by applicable Virginia law.

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 ______. If Listing Broker is engaging in dual or designated agency, a separate consent agreement has been entered into by Listing Broker and Applicant.

RENTAL AND CREDIT HISTORY: Reason for leaving current residence: Has any Applicant ever been rejected for tenancy? Yes ___; No ___. If yes, please explain:_____

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:

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

| Please give the names and phone nur | nbers of three references: |
|-------------------------------------|----------------------------|
| Name: | Phone Number: |
| Name: | Phone Number: |
| Name: | Phone Number: |

Please provide the following information if the lease will be guaranteed.

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| Name of Guarantor: | Relationship: | | |
|--------------------|---------------|--|--|
| Address: | | | |
| Phone Number: | | | |

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.

The Applicant hereby certifies that the information contained in this Application for Lease 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 for Lease. We understand this is a binding contract separate and apart from the Lease Agreement.

| SIGNATURE OF APPLICANT | 1 1 |
|--|---------------------------------------|
| | Date |
| SIGNATURE OF ADDI ICANT | / / |
| SIGNATURE OF APPLICANT | Date |
| | |
| SIGNATURE OF GUARANTOR | |
| | Date |
| LISTING BROKER TO VERIFY APPLICANT'S IDENTIFICATION | |
| TVDE OF INFNITURE TONI | |
| TYPE OF IDENTIFICATION | |
| | |
| The second secon | her and an annual shade |
| The undersigned acknowledges receipt from Applicant of the sum of \$ | application fee in the amount of |
| payable to, which amount consists of an 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, | · |
| | |
| | |
| Si | gnature of Landlord or Listing Broker |
| Leasing Broker's Address | |
| | |
| Phone no Cell phone or pager no | Email: |
| Broker's Code: | |
| | |
| | |
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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 and regulations.

| | ween | | | | _ (Applicant or Tenant, wi | hether one or more |
|------|---|-------------------|----------------|-----------------|----------------------------|--------------------|
| | | | | | | (Landlord |
| | ough | | | | _ (Listing Broker or Age | ent, who represent |
| Lar | dlord), and loes not represent Appli | cant) | | | (Leasing Bro | ker, who does |
| ord | ioes not represent Appn | cant). | | | | |
| Ap | plicant hereby applies for a r | esidential living | unit located a | ıt | | .Virginia, in th |
| Cit | y/County of | | , for occup | ancy commencing | on | , at a |
| init | ial monthly rent payment of | | | _Dollars (\$ | |). |
| | PI | LEASE FILL I | N ALL INFO | ORMATION CO | MPLETELY | |
| 1. | Applicant: | | SSN | : | Date of Birth: | |
| | Tel # (H): | Tel # (W): | | Cell Phone #: | Email: | |
| | Present Address: | | | Vears. Lar | dlord: | |
| | | Street/P.O. | Box | | | |
| | | | | | | |
| | | | | Landlor | d's Tel #: | |
| | City | State | Zip | | | |
| | Previous Address: | | | Years: La | andlord: | |
| | | Street/P.O. | | | | |
| | | | | | | |
| | <u></u> | | ~. | Landlore | 1's Tel #: | |
| | City | State | Zip | | | |
| | Presently Employed By: | | | How | ong? | |
| | | | | 11011 1 | | ······ |
| | | | | | | |
| | Desition | | G-1 ¢ | (111) | | |
| | Position: | | _Salary 5 | (Wk., M | o., 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: | | | Vears. I an | dlord: | |
| | Present Address: | Street/P.O | Box | _1 cars Lan | uloid. | |

This contract is for use by Deborah Bass. Use by any other party is illegal and voids the contract.

Instanct

| | | | | | Landlo | rd's Tel #: | |
|--|---------|-----------|---|-------|--------------|--|---------|
| C | ity | | State | Zip | | | |
| Previous Addr | ess: | | | | Years: | Landlord: | |
| TTOTIOUS TRUE | | | Street/P.O. Box | | | | |
| | | | | | Landlo | ord's Tel #: | |
| Ē | ity | | State | Zip | | | |
| Co-Applicant | Emplo | yed By: _ | | | Ho | w long? | |
| Position: | | | Salary \$ | | Supervisor: | Tel | ephone: |
| Other Occupa | | | | | | | |
| | | | | | | | |
| | | Name: | | | Age: | Relationship: | |
| Number of Ve | ehicles | : | | | | | |
| | | | | | | Weight: | Name: |
| c |)ther: | | How N | Iany: | I | D TAG#: | |
| If you are pre Applicant | sently | in Armed | Services, state: | | Co-Applicant | | |
| Rank: | | | | | Rank: | | |
| Serial No.: | | | alanda da maranga ang ang ang ang ang ang ang ang ang | | Serial No.: | | |
| Outfit: | | | | | Outfit: | and a second | |
| Telephone: | | | | | Telephone: | | |
| Other Income Applicant Amount \$ | | | | Per: | | Source Of: | |
| Co-Applicant Amount \$ | | | | Per: | | Source Of: | |

COMPLETE AND SPECIFICALLY LIST ANY DEBTS NOW OUTSTANDING (ATTACH ADDITIONAL SHEET IF NECESSRY)

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

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Instandt

| 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 # |
| CIRCLE IF YOU OWN: C | AMPER | MOTORCYCLE | BOAT TRI | UCK TRAILER |

Will any person named above require a visual smoke detector for deaf or hearing impaired? Yes No_____

A non-refundable application fee in the amount of ______must accompany this Application. A deposit of ______must accompany 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.

Upon application by Applicant to become tenants in this residential living unit, Agent will remove the unit from the available rent list. Applicant has been furnished a copy of Landlord's standard lease agreement to review. 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 and begin paying rent on the date specified in this Application for occupancy of the premises, Applicant agrees to pay Landlord's actual expenses and damages up to the full amount of the security deposit. Agent reserves the right to make all appropriate deductions from the deposit to recover the Landlord's actual damages and expenses as allowed by applicable Virginia law.

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RENTAL AND CREDIT HISTORY:

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:

Has any Applicant ever filed for bankruptcy? Yes ____; No ____. If so, please give dates of filing and status of case: _____.

| Please give the names and phone nu | mbers of three references: | |
|------------------------------------|----------------------------|--|
| Name: | Phone Number: | |
| Name: | Phone Number: | |
| Name: | Phone Number: | |

Please provide the following information if the lease will be guaranteed.

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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.

The Applicant hereby certifies that the information contained in this Application for Lease 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 for Lease. We understand this is a binding contract separate and apart from the Lease Agreement.

| SIGNATURE OF APPLIC | CANT | | / / | |
|--|--|------------------------------|-----------------------|--|
| | | | Date | |
| SIGNATURE OF APPLIC | CANT | | // | |
| | | | Date | |
| SIGNATURE OF GUARANTOR | | | / | |
| | | | Date | |
| LISTING BROKER TO | VERIFY APPLICANT'S IDENTIFIC | CATION | | |
| TYPE OF IDENTIFICAT | ION | | | |
| | | | | |
| The undersigned acknow | ledges receipt from Applicant of the s | um of \$ | by cash or pe | ersonal check |
| navable to | which amou | nt consists of an annli | ication fee in the | amount of |
| payable to, which amount consists of an application fee in the an and a security deposit in the amount of \$ | | | | uniouni oi |
| Ф | und a security deposit in the a | | | ······································ |
| | | | | / / |
| | Signature of Recipier | | | ate Received |
| This Application for Lease | e is hereby ACCEPTED as of the | day of,, | | |
| | | | | |
| | | Signat | ure of Landlord or L | isting Broker |
| Leasing Broker's Address | | | | |
| Phone no | Cell phone or pager no | En | nail: | |
| Broker's Code: | | | | |
| | | | | |
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| | RGINIA ASSOCIATION OF REALTORS® | | | |

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from the VIRGINIA ASSOCIATION OF REALTORS

This contract is for use by Deborah Bass. Use by any other party is illegal and voids the contract.

the name "VIRGINIA ASSOCIATION OF REALTORS®", in connection with any other form, is prohibited without prior written consent