Application

* **$30 Application Fee – Per Two People** (Non-Refundable) by way of:

**Exact Cash, Money Order, or Cashier’s Check –** Payable to **Forehand Inc.**

* **All persons over 18 years of age must be on the application.** Any persons under 18 may be listed as dependent(s)
* **EACH PERSON (Including Co-Signers)** will need to submit the following with this application:
* **Current Driver's License, Photo ID, or Passport**
* **Social Security Card**
* **Most Recent Pay Stubs for Past Month**
  + - IF working through a **TEMP AGENCY**, we require that you have been **employed with them for at least 1 YEAR**
    - IF you get money from State or Federal Benefits **(i.e. Disability, Social Security, Retirement)** we will need to see your **AWARDS LETTER**
* This application WILL NOT be processed unless **we see you sign it, or it is notarized**
* Applications may take 3-5 business days to process. Security Deposit is due within 48 hours of Application Approval. Security Deposits hold a property for 14 days and are Non-Refundable if you decide not to move-in.
* Security Deposit, Pet Deposit (if applicable), and First Month’s Rent are to be paid SEPARATELY by Money Orders or Cashier’s Checks in EXACT AMOUNTS (No Personal Checks) before move-in. All parties to the application (including Co-Signer) must sign the lease prior to moving-in / obtaining keys.

**\*\*THIS APPLICATION MUST BE COMPLETE TO BE PROCESSED\*\***

**What do we look for in an applicant?**

* Income should be 3.5 times the amount of expected monthly rent.

Example:

If the expected rent will be $450 monthly

$450 x 3.5 = $1,575 Required Monthly Income (after taxes).

If you have a partner or spouse that you have been living with for at least a year, with Landlord Reference, both incomes may be combined to determine your total monthly income.

(Friends and Family Members do not qualify as a Landlord Reference.)

* If your monthly income doesn't meet the above requirements, we may request a Co-Signer.

(The Co-Signer will be responsible for filling out a Co-Signer Application and will be asked to provide documentation we request from all applicants: Photo ID, Social Security Card, and Proof of Income.)

* Have you been with your job at least 2 years? (If no, you may need a Co-Signer.)
* Good Rental Reference from Current or Most Recent Landlord. If you have less than 2 Years of Rental History, we may require a higher Security Deposit.
* Standard Security Deposit is equal to First Month’s Rent.

**No Rental History and / or No Credit will result in a Double Security Deposit (First Month’s Rent times 2).**

* Any person over 18 years of age is required to be on the application. There is a $30 Processing Fee (per Two-People) to be paid before we can process your application.
* We will conduct a Background Check and Credit Check for each person. (Criminal History and / or Low Credit Scores do not automatically disqualify you. Previous Evictions and Outstanding Debts to any Landlords are grounds for denial of an application).

**ADDRESS YOU ARE APPLYING FOR:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Desired Move-In Date: \_\_\_\_\_\_\_\_\_

**Applicant Full Name (First, Middle, Last)**:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SSN: \_\_\_\_\_\_\_\_-\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_ \_\_ /\_\_\_ \_ /\_\_\_\_\_\_\_\_

Driver’s License #: \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ State: \_\_\_\_ Phone Number: (\_\_\_\_\_) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_@\_ \_\_ \_\_\_\_\_\_\_\_\_\_.com

**Current Address:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip

Resided From: \_ \_\_ /\_\_\_\_\_\_ (Month/Year) To: \_ \_\_ /\_\_\_\_\_\_ (Month/Year) Monthly Rent $\_\_\_ \_\_

Landlord Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Landlord Number: (\_\_\_\_\_) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Previous Address:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip

Resided From: \_ \_\_ /\_\_\_\_\_\_ (Month/Year) To: \_ \_\_ /\_\_\_\_\_\_ (Month/Year) Monthly Rent $\_\_\_ \_\_

Landlord Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Landlord Number: (\_\_\_\_\_) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Current Employer Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_

Address**:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip

Position: \_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_ Pay Rate: $\_\_\_\_\_\_\_\_\_\_\_\_ Hours Per Week: \_\_\_\_ \_\_\_

Length of Employment: \_\_\_\_ \_\_\_\_\_\_\_\_\_

Supervisors Name: \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: (\_\_\_\_\_) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_

**Previous Employer Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_

Address**:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip

Position: \_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_ Pay Rate: $\_\_\_\_\_\_\_\_\_\_\_\_ Hours Per Week: \_\_\_\_ \_\_\_

Length of Employment: \_\_\_\_ \_\_\_\_\_\_\_\_\_

Supervisors Name: \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: (\_\_\_\_\_) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_

**CO-APPLICANT:**

**Co-Applicant Full Name (First, Middle, Last)**:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SSN: \_\_\_\_\_\_\_\_-\_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_ \_\_ /\_\_\_ \_ /\_\_\_\_\_\_\_\_

Driver’s License #: \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_ State: \_\_\_\_ Phone Number: (\_\_\_\_\_) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_@\_ \_\_ \_\_\_\_\_\_\_\_\_\_.com

**Current Address:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip

Resided From: \_ \_\_ /\_\_\_\_\_\_ (Month/Year) To: \_ \_\_ /\_\_\_\_\_\_ (Month/Year) Monthly Rent $\_\_\_ \_\_

Landlord Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Landlord Number: (\_\_\_\_\_) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Previous Address:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip

Resided From: \_ \_\_ /\_\_\_\_\_\_ (Month/Year) To: \_ \_\_ /\_\_\_\_\_\_ (Month/Year) Monthly Rent $\_\_\_ \_\_

Landlord Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Landlord Number: (\_\_\_\_\_) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Current Employer Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_

Address**:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip

Position: \_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_ Pay Rate: $\_\_\_\_\_\_\_\_\_\_\_\_ Hours Per Week: \_\_\_\_ \_\_\_

Length of Employment: \_\_\_\_ \_\_\_\_\_\_\_\_\_

Supervisors Name: \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: (\_\_\_\_\_) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_

**Previous Employer Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_

Address**:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip

Position: \_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_ Pay Rate: $\_\_\_\_\_\_\_\_\_\_\_\_ Hours Per Week: \_\_\_\_ \_\_\_

Length of Employment: \_\_\_\_ \_\_\_\_\_\_\_\_\_

Supervisors Name: \_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: (\_\_\_\_\_) \_\_\_\_\_\_-\_\_\_\_\_\_\_\_\_

**Other Occupants:** Dependents Only - All others must be listed as Applicant or Co-Applicant(s)

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth: \_\_\_\_\_ /\_\_\_\_\_ /\_\_\_\_\_\_\_

Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth: \_\_\_\_\_ /\_\_\_\_\_ /\_\_\_\_\_\_\_

Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth: \_\_\_\_\_ /\_\_\_\_\_ /\_\_\_\_\_\_\_

Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth: \_\_\_\_\_ /\_\_\_\_\_ /\_\_\_\_\_\_\_

Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_Date of Birth: \_\_\_\_\_ /\_\_\_\_\_ /\_\_\_\_\_\_\_

Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Pets:** Pets will be permitted with written permission only. Some properties offered for rent do not accept any pets of any type. **ALL PROPERTIES THAT ACCEPT PETS REQUIRE A NON-REFUNDABLE PET DEPOSIT OF $250.00 FOR EACH PET, WITH A TWO PET LIMIT.**

Type: \_\_\_\_\_\_\_\_\_\_\_\_\_ Breed: \_\_\_\_\_\_\_\_\_\_\_\_\_Weight: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_ \_\_\_\_\_ Age:

Type: \_\_\_\_\_\_\_\_\_\_\_\_\_ Breed: \_\_\_\_\_\_\_\_\_\_\_\_\_Weight: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_ \_\_\_\_\_ Age:

**Vehicles** (due to limited parking - **only 2 vehicles allowed** at the property unless otherwise authorized):

Make: Model: Year: Color:

Make: Model: Year: Color:

**General Questions:`**

**\*\* It is your responsibility to read over the entire application \*\***

Circle If You Own: Camper Boat Commercial Truck RV Trailer/Other

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

Have you ever filed a petition for bankruptcy? Yes / No

Has it been discharged? Yes / No

Have you ever been convicted of a felony? Yes / No

Have you ever had a judgment filed against you by a previous landlord? Yes / No

Are you able to pay a security deposit equal to one month's rent with 48 hours of approval of your application? Yes / No

Do you understand you must pay the deposit must be paid with cashier’s check or money order and that this deposit is NON- REFUNDABLE if you decide not to move in? Yes / No

Do you understand, if you are unable to move within 15 days of this application, you will need to reapply closer to your move-in date if still available? Yes / No

Anyone over the age of 18 will be required to pay an application fee, have a background check, and verification of rental history ran on them. This is to ensure the safety and fairness of all residents at Forehand, Inc. managed properties. Yes / No

Do you understand that all persons on the lease will be signing one contract that holds them equally responsible for the dwelling? In order to release a person from the lease all lease holders must first qualify financially without signee. Yes / No

Do you understand that a Release from Lease form must be filled out and signed by each person on the lease and by the signee being released? If you do not qualify financially, we will give you an opportunity to have a co-signer fill out an application. Yes / No

Do you understand that only 2 vehicles per unit if residing in a multi-family complex? Yes / No

Do you understand if you need to break your lease early you may pay a 2 month buy out and must move-out the same day that it’s paid? Yes / No

Do you understand that your security deposit cannot be used as rent payments at any time? If you sign a short term lease your security deposit is NON-REFUNDABLE and will only be refundable if you stay a full 12-month term. Yes / No

DISCLOSURE OF BROKERAGE RELATIONSHIP: Landlord and Tenant each acknowledge the brokerage relationship as described. Landlord and Tenant also confirm that the disclosure of and consent to the brokerage relationships described below were made prior to the time the offer to lease was made by Tenant and delivered to Landlord. The duties of real estate licensees in Virginia are set forth in Section 54.1-2130 et seq. of the Code of Virginia and in the regulations of the Virginia Real Estate Board. In addition to the information contained in this disclosure pertaining to brokerage relationships, there may be other information relevant to the transaction, which may be obtained from other sources.

Landlord and Tenant confirm that in connection with the transaction contemplated by this Application, the Broker and their representatives have acted on behalf of Landlord as Landlords agent.

**PLEASE INITIAL:** Applicant: \_\_\_\_\_\_\_\_\_\_ Co-Applicant: \_\_\_\_\_\_\_\_\_\_

DISCLOSURE OF “MEGANS LAW”: You should exercise whatever due diligence you deem necessary with respect to information on any sexual offenders registered under Chapter 23(19.2-387 et seq.) of Title 19.2; whether he owner proceeds under subdivision I or 2 of subsection A of 55-519. Such information may be obtained by contacting your local police department or the Department of State Police, Central Criminal Records Exchange, at (804) 674-2000.

**PLEASE INITIAL:** Applicant: \_\_\_\_\_\_\_\_\_\_ Co-Applicant: \_\_\_\_\_\_\_\_\_\_

The Applicant(s) hereby certify that the information contained in this Application for Lease is true and correct to the best of Applicant(s) knowledge and belief. Applicant(s) hereby authorize the Broker to conduct a credit check on Applicant(s) and an appropriate background check to verify information provided herein by Applicant(s) 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.

WE WILL NOT ACCEPT ANY APPLICATION WITHOUT **WITNESSING YOUR SIGNATURE**. IF YOU ARE UNABLE TO SIGN IN FRONT OF A REPRESENTATIVE YOU MAY HAVE IT **NOTARIZED**.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Witness Initials \_\_\_\_ \_\_\_

Applicant’s Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Witness Initials \_\_\_\_ \_\_\_

Applicant’s Signature Date

**Verification of Rent/Landlord Reference**

I/we authorize \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to release any and all information regarding my rental history. Current Landlord Name

Name of Applicants: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Landlord Name/Rental Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rental Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_

City State Zip

***DO NOT FILL OUT BELOW HERE*** (this is to be filled out by the landlord)

Resided From: \_ \_\_ /\_\_\_\_\_\_ (Month/Year) Resided To: \_ \_\_ /\_\_\_\_\_\_ (Month/Year)

Monthly Rent $\_\_\_\_ \_\_\_ \_\_ Amount still owed $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are there any outstanding charges on the account? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have any material NON-Compliance notices been issued? \_\_\_\_\_\_\_\_\_\_

If yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have any 30 day Non-remediable or 30-day repeat violation notices been issued? \_\_\_\_\_\_\_\_\_

If yes- when? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any noise complaints? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Did they leave the home in clean and habitable condition? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Would you rent to this person again? YES NO

Was there and eviction pending? YES NO

Was an acceptable Notice to Vacate submitted? YES NO

General Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of individual filling out form \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title \_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return this form via email to:

[Nicole@forehandinc.com](mailto:Nicole@forehandinc.com) or [Sierra@forehandinc.com](mailto:Sierra@forehandinc.com)

Fax: (434) 847-7745 ATTN: Property Management