RAINES PROPERTY MANAGEMENT, INC RENTAL/CREDIT APPLICATION

OFFICE USE ONLY:

| Property Address applied for: Lease beginning date: | M. Albana | | | tion Fee Pd://_ |
|--|---------------------------------|------------------|----------------|--------------------|
| Lease beginning date: | Monthly rent: | | | nod: |
| ** PLEASE NOTE: All informat | ion must be completed including | ng the social se | | |
| will not be accepted! | | | | |
| PERSONAL INFORMATION | | | | |
| Name of Applicant: | Γ | ate of Birth: _ | / | |
| Social Security No.: | Visa #: | | | |
| Driver's License No: | Driver's Licen | se from this Sta | ate: | |
| Present Address: | | | | |
| Street # Telephone Number: () | City | State | Zip | |
| Telephone Number. () | Eman Address. | | | |
| Are you a:student, | graduate student, | non studen | t | |
| Prior Address: | | | | |
| Street # | City | State | Zip | |
| EMPLOYMENT INFORMATIO | <u>N</u> | | | |
| Employer: | Position: | | | |
| Employer's Address: | | | | |
| Telephone No.: () | Salary: | (Wk. | Biwk. Mo. Yr.) | |
| How long have you been employed | with current employer? | | - | |
| SPOUSE INFORMATION | | | | |
| Name: | Date of Birth: | _// | _ | |
| Social Security No: | Visa #: | | | |
| Driver's License No: | Driver's License f | rom this State: | | |
| Address:Street # | City | State | 7: | |
| Telephone No.: () | | | Zip | <u> </u> |
| Are you a:student, | _graduate student,non s | tudent | | |
| Employer: | Position: | | | |
| Employer's Address: | | | | |
| How long have you been employed | with current employer? | Sal | lary: | (Wk. Biwk. Mo. Yr) |

| PET INFORMATION | <u>N</u> | | | |
|---|---|---------------|-----------------------------|---------------------|
| Туре: | Number: | Weight: | Description: | |
| OTHER INFORMAT | <u>CION</u> | | | |
| Been served an eviction Willfully or intentionall Been convicted of any r | yes no notice or been asked to y refused to pay rent wh misdemeanor or felony of | If yes, when? | renting?yes o If yes, when? | |
| f yes please explain | | | | |
| f yes please explain | | | | |
| | Name | | | Relationship |
| mergency Contact #1: | | | | |
| | | | State | |
| mergency Contact #1: | Name | Phone # | State | Relationship |
| mergency Contact #1: | Name | Phone # | State | Relationship Zip |

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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 Title19.2: whether the owner proceeds under subdivision 1 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 Criminal Records Exchange at (804) 674-2000 or the website address www.state.va.us/vsp/vsp.html.

| A \$40.00 fee must accompany this application which is non-refundable. A deposit of \$ must |
|--|
| accompany this application and will become a security deposit provided in the Lease Agreement upon the |
| commencement of the lease term. |
| Upon the signing of this application and approval of the applicant(s) to become tenant(s) in this residential |
| living unit, the Rental Agent will remove the said unit from the availability rental list. Applicant(s) agree to |
| pay the Landlords the full amount of the deposit should the applicant(s) fail to execute a Lease Agreement |
| and begin paying rent on the date specified in this application for occupancy of the premises. Rental Agent |
| reserves the right to make all appropriate deductions from the deposit to recover the Landlords damages |
| and expenses as allowed to be applicable by Virginia law. |
| I/We declare all forgoing information is true and correct, and I/we hereby authorize you to conduct a credit |

I/We declare all forgoing information is true and correct, and I/we hereby authorize you to conduct a credit check and an appropriate background check to verify information provided by applicant(s) for approval or rejection of this application. My signature below authorizes all parties to release all information regarding this application and rental tenancy to Raines Property Management including for all future collection and garnishment actions. Raines Property Management reserves the right to reject any applicant based upon credit history, rental reference and criminal background. In accordance with Section 555.1-1204 of the Code of Virginia, the undersigned parties hereby acknowledge that with respect to the dwelling as applied for. The Landlord has provided to the Tenant and the Tenant has received the Statement of Tenant Rights and Responsibilities developed by the Virginia Department of Housing and Community Development and posted on its website (dhcd.virginia.gov/landlord-tenant-resources) pursuant to Section 936-139 Code of Virginia.

| (September Dates | Reginald Lee Britts | |
|-----------------------------|---------------------|------|
| Landlord or Agent Signature | Printed Name | Date |
| Tenant Signature | Printed Name | Date |
| Tenant Signature | Printed Name | Date |

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Raines Property Management, Inc

1504 N. Main Street. Blacksburg, VA 24060

Telephone (540) 951-0000 Fax (540) 953-0406 www.rainespropertymanagement.com

Landlord Verification Form

TOP SECTION TO BE COMPLETED BY RESIDENT. BOTTOM SECTION TO BE COMPLETED BY CURRENT LANDLORD. IT IS THE RESIDENTS RESPONSIBILITY TO TAKE THIS FORM TO THE CURRENT LANDLORD, AND TO INSURE IT IS COMPLETED AND RETURNED TO RAINES PROPERTY MANAGEMENT.

| Raines Property Management address a | applied for: | | |
|--|---|------------------------|--|
| My Current Landlord is | | | |
| Landlord's Address Street # | City | State | Zip |
| Landlord's Phone No. () | Landlord's Fax No. (|) | |
| Email Address: | | | |
| I hereby authorize the above named lan | ndlord to release all information regard to Raines Property N | | |
| Signed | Date// | | |
| ********* | ********** | ****** | ***** |
| Raines Property Management has recei been given as a rental reference. We w us as quickly as possible. | ved an application fromould appreciate you answering the fol | lowing questions and r | and your name has eturning this form t |
| 1) How long has the applicant resided | d with you? | | |
| 2) Does the applicant have a lease wi | th you? | | |
| 3) Was the lease completed? | If no, why not? | | |
| 4) What is/was the monthly rent? | | | |
| 5) Did the rent include utilities? | | | |
| 6) Did the applicant pay rent on time | ? If no, how many tim | es late? | |
| 7) Is anyone else on the lease agreem | ent? If yes | s, how many? | |
| 8) How much security deposit was re | turned? how much a | re/were you holding? | |
| 9) Did/does the applicant have any pe | ets? | | |
| 10) Do you have any documented com | aplaints about the applicant? | | |
| Signature of Landlord or Agent | | Date/ | / |
| | Print Name | | |

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** PLEASE NOTE: All information MUST be completed including the social security number and no alteration can be made on this form or the application will not be accepted – there are NO exceptions!

Guarantee of Payment

<u>Please print – we must have legible information</u>

| Date://// | Unit:erty Management Division least | ing an anartment to | | for |
|---|-------------------------------------|---------------------------------|---------------|----------------------|
| term of months. | I. | do hereby sign this doci | ıment as a gu | arantor of the timel |
| performance of his/her responsi subsequent renewals, modificat | I, | hich begins on or about _ s. | / / | and <i>all</i> |
| Guarantor's Name: | | Date of Birth | // | |
| Social Security No.: | Relationship to the applicant: | | | |
| Present Physical Address: | | | | |
| Stre | et# | City | State | Zip |
| Present Mailing Address: | | | | |
| Phone No: () | Ema | il Address: | | |
| Employer: | O | occupation: | | |
| Employer's Address: | | | | |
| Street # Employer's Phone No.: (| City | Sta | ate | Zip |
| How long employed? | Income: | (Mo. / Yr.) | | |
| Signature of Guarantor | | Date signed | / / | |

Notice to Guarantors

You are being asked to guarantee the debt for the above-described lease. If the resident fails to pay the debt you will be responsible. You may have to pay in full the debt for all charges associated with the lease including damages, late charges and collection costs. The management company can collect this debt from you without first trying to collect from the lessee. The management company can use the same collection methods against you as the lessee. If the lease is ever in default, then it may become part of your credit record. The signature of this form also authorizes the management company to conduct a credit check to verify information or accept the guarantor.