



PROPERTY MANAGEMENT

Website: www.BHHSTowneRentals.com

HELPFUL INFORMATION FOR SUBMITTING YOUR RENTAL APPLICATION

Thank you for looking to BHHS Towne Realty for your next home. The following information will help us in processing your rental application as quickly as possible. A copy of BHHS Towne Realty's Tenant Selection Criteria is available in the Rental Office and online at www.BHHSTowneRentals.com.

To apply online, please visit our website: www.BHHSTowneRentals.com, click "View Featured Rentals", search for the property you have been shown and you are interested in applying for. Once you find the property, click "Apply Now" and follow the directions provided OR you may download the rental application and submit in person at our main office listed below.

If you have a fraud alert or freeze on your credit file, you will need to lift the fraud alert or freeze PRIOR to submitting your application. Not doing so will require you to re-apply and incur an additional \$50 application fee.

- 1. Please fill out the rental application in its entirety and please don't forget to sign it. Please sign the Landlord Verification form as well.**
2. Along with your application, please submit the application fee made payable to BHHS Towne Realty in the amount of \$50.00 for each individual.
3. Within 24 hours after your rental application is approved, you must present us with a Cashier's Check or Money Order made payable to BHHS Towne Realty as your Application Deposit (we will notify you of this amount at the time of rental application approval). You may also pay the Application Deposit online. Until funds are received, the property will remain on the rental market and other rental applications may be received.
4. We will need a copy of your photo ID and your social security card or your letter issued by the IRS stating your individual taxpayer identification number.
5. We will need your current, as well as former landlord's name, address and phone number. If you now own your home, we will need mortgage information. We will also need documentation regarding your plans for that home (i.e.: copy of listing for sale, copy of sales contract, copy of lease agreement)
6. CIVILIANS: We will need your current funds provider, or employer information. If you have an employer, you must provide copies of your 2 most recent pay stubs. If you have a funds provider, i.e. Social Security benefits, Child Support, Voucher Program, etc., we will need a copy of the document stating your benefits. **NOTE:** If you are **self-employed**, we will need your tax return(s) for the previous three (3) years.
7. MILITARY PERSONNEL: We will need a copy of your most current LES and a copy of your current transfer orders.

ALL REQUESTED IDs AND DOCUMENTATION WILL BE REQUIRED TO BE INCLUDED WITH YOUR APPLICATION SUBMISSION.

The Property Manager whose property you are applying for will process your application. Your credit history, criminal history, landlord references and your source of funds will be evaluated in qualifying you to rent the property. In addition, any applicant with a bankruptcy must show a discharge more than three (3) years ago and have established new credit with a positive rating with at least one account. If we receive all information needed and it can be verified easily, the application process will normally take 2 – 3 business days, excluding weekends. We will contact you immediately upon completing the process to discuss the results with you. Thank you!

BHHS Towne Realty • 701 Greenbrier Parkway • Chesapeake, VA 23320 • (757) 420-0071 • (757) 420-1074 (Fax)

NOTES:

| |
|--|
| |
| |
| |



Application for Tenancy

All sections must be completed. Incomplete applications will not be processed.
Website: www.BHHSTowneRentals.com

PM Initials: _____

I would like to apply for the property located at _____ for occupancy commencing on _____ for a term of _____ at an initial monthly rent payment of \$_____.

PERSONAL INFORMATION

Name: (_____) _____
(Mr/Mrs/Ms/Miss) First Middle Name Last (Sr/Jr/ 1st/2nd)

Social Security #: _____ / _____ / _____ Date of Birth: _____ / _____ / _____ Relationship to Co-Applicant: _____

Current Address: _____
Street City State Zip

Phone: (H): _____ (W): _____ (C): _____

E-mail Address: _____

Current Landlord: _____ Landlord Phone: _____

Dates at this address: From _____ to _____ Monthly Rent: _____

Do you have a lease: Yes No Expiration Date: _____ Notice given: Yes No

Former Address: _____
Street City State Zip

Former Landlord Name: _____ Former Landlord Phone: _____

Dates at former address: From _____ to _____ Monthly Rent: _____

Reason for Leaving: _____

SOURCE OF FUNDS INFORMATION

Present Employer: _____

Address: _____
Street City State Zip

E-mail: _____ Employer's Phone: _____

Occupation: _____ Supervisor: _____

Monthly Salary: _____ How long there: _____

Funds Provider (i.e.: Social Security Benefits, Voucher Program, etc.): _____

Address: _____
Street City State Zip

E-mail: _____ Phone: _____

Monthly Benefits: _____

IF MILITARY, PLEASE COMPLETE THIS SECTION

Duty Station: _____

Rate/Rank: _____ Phone: _____

Commanding Officer: _____ Home of Record: _____

IN CASE OF EMERGENCY, NOTIFY: (Must be someone who does not reside with you)

Name: _____ Relationship: _____

Address: _____ Phone: (____) _____
Street City State Zip

CREDIT/DEBT INFO:

| OUTSTANDING DEBTS | MONTHLY PYMT | OUTSTANDING DEBTS | MONTHLY PYMT |
|-------------------|--------------|-------------------|--------------|
| _____ | \$ _____ | _____ | \$ _____ |
| _____ | \$ _____ | _____ | \$ _____ |
| _____ | \$ _____ | _____ | \$ _____ |

Bank: _____ Acct #: _____

Address: _____

LIST ALL OTHER PERSONS WHO WILL OCCUPY THE PROPERTY:

| | | | |
|-------|------------|---------------------|------------|
| _____ | DOB: _____ | Relationship: _____ | SSN: _____ |
| _____ | DOB: _____ | Relationship: _____ | SSN: _____ |
| _____ | DOB: _____ | Relationship: _____ | SSN: _____ |
| _____ | DOB: _____ | Relationship: _____ | SSN: _____ |
| _____ | DOB: _____ | Relationship: _____ | SSN: _____ |

VEHICLE INFORMATION:

VEHICLE MAKE/MODEL: _____ Year: _____ License #: _____ State: _____

VEHICLE MAKE/MODEL: _____ Year: _____ License #: _____ State: _____

VEHICLE MAKE/MODEL: _____ Year: _____ License #: _____ State: _____

OTHER:

Do you have any Pets? Y N How many?: _____ Are they Neutered/Spayed? Y N

List type and weight of all pets?: _____

List breed and age of all pets: _____

Do you have any unpaid judgments or collections? Y N Have you filed Bankruptcy in the last 3 years? Y N

Are you now being or have you ever been evicted? Y N Have you ever been convicted of a crime? Y N

If you answered Yes to any of the above, please explain: _____

Renter's Insurance? Y N With Whom? _____

Applicant hereby authorizes Agent to verify all information contained in this Rental Application and to conduct credit and criminal background checks. Applicant certifies that information contained in this application is true and accurate to the best of Applicant's knowledge. Should Applicant withhold or provide false or inaccurate information, this application and any lease entered into based on this information may be voided immediately. Application fee must be received with application made payable to BHHS Towne Realty and is NON-REFUNDABLE.

Each Applicant must pay at the time this Application is made a non-refundable Application Fee in the amount of \$50 per applicant as an offset to Agent's cost, time and expense of processing my initial Application. In addition, the Applicant must pay an Application Deposit within 24 hours of rental application approval. The Application Deposit is not a security deposit but will convert into the Security Deposit on the Commencement Date of the Lease Agreement.

Upon submission of this Application, Agent reserves the right to remove the Dwelling Unit from the available rent list. If this application is denied by Landlord, the Application Deposit shall be refunded to Applicant. If this Application is approved and Applicant fails to rent the Dwelling Unit, Landlord shall be entitled to retain that part of the Application Deposit equal to Landlord's actual damages and expenses as provided in Section 55.1-1203 of the Virginia Residential Landlord Tenant Act (VRLTA).

No representations, promises, or agreements as to occupancy or date of possession have been made and this application shall not be construed as a lease or agreement therefore. Applicant should exercise whatever due diligence Applicant deems necessary with respect to information on the property including without limitation, mold, lead-based paint, pests or insects, and any sexual offenders registered under Chapter 23 (§19.2-387 et seq.) of Title 19. Information regarding registered sex offenders 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. Upon Applicant's request, Agent will provide Applicant with a copy of the Lease for review.

Applicant acknowledges that Agent represents the Landlord/Owner and signatures below indicate this fact has been disclosed. Agent adheres to all applicable federal, state and local fair housing laws and regulations and the property will be shown and made available to all persons without regard to any protected class under such laws or regulations.

SIGNATURE: (required for processing)

Applicant's Signature: _____ Date: _____

Phone number where applicant may be contacted: _____

Showing Agent: _____ Firm: _____

NOTE: Our application fee is \$50 for each individual applicant.

FOR OFFICE USE ONLY

Application fee received: \$ _____ Check/M.O./Cashier's Check #: _____

Received by: _____ Date & Time of Application: _____ AM PM

Application Deposit received: \$ _____ M.O./Cashier's Check #: _____

Received by: _____ Date & Time of Application: _____ AM PM

LANDLORD VERIFICATION

THIS SECTION TO BE COMPLETED BY APPLICANT

I hereby authorize release of my rental history/information.

Signature of Applicant

Date

THIS SECTION TO BE COMPLETED BY PROPERTY MANAGER

The individual named directly above is an applicant of a rental housing that requires verification of rental payment history and care of rental property. The information provided will remain confidential to satisfaction of that stated purpose only. Your prompt response is crucial and greatly appreciated.

Sincerely: _____
Property Manager

Date: _____

TO: (Name and address of Landlord)

Landlord:Phone Number: _____

Fax Number: _____

E-Mail: _____

Applicant Name: _____

Current or Former Address: _____

Applying to rent property located at: _____

THIS SECTION TO BE COMPLETED BY VERIFYING LANDLORD ONLY

Dates of Residency? Lease from _____ to _____

Amount of monthly rent \$ _____ Number of returned checks: _____

Do they pay their rent on time? Yes No If not, how many times late? _____

Proper move-out notice given? Yes No Notice given by: Tenant Landlord

Reason for Leaving: _____

Were there any deductions from their security deposit? Yes No Please comment: _____

Do they have an outstanding balance? Yes No If so, how much? \$ _____

Would you rent to them again? Yes No Please comment: _____

If pets, any problems? (i.e.: odor, fleas, damage, etc.) Yes No Please comment: _____

Did you ever take legal action on them? Yes No Please comment: _____

Landlord's Signature

Landlord's Printed Name & Title

Date

Return Form To: BHHS Towne Realty

PM: _____

PM Phone: _____

Fax or E-mail: _____

FOR PROPERTY MANAGER USE ONLY:

PM Received: _____ Date & Time: _____ AM PM

Landlord Reference: _____

Source of Funds Verification: _____

Owner Decision: _____

Agreed Rent Amount: _____ Sec. Dep. Amount: _____
Pet Deposit / Fee: _____ Pet Deposit Pet Fee
Date Application Approved by Owner: _____ Date Accepted by Applicant: _____

Alternate Rent Offer:

Applicant's Offer: _____ Date Conveyed to Owner: _____
Amount Countered or Accepted by Owner: _____ Countered Accepted
Date Offer Countered or Accepted by Owner: _____ Countered Accepted
Date Offer Accepted by Applicant: _____

Other Funds Received:

Explanation of Funds (i.e.: move/in rent; 1st month full rent, etc.): _____
Check/M.O./Certified Check Number(s): _____
Received By: _____ Date: _____