

Print first 6 pages if 2 applicants, all pages if 4 applicants.

SUMMARY

This document SUMMARY is based on NVAR (Northern Virginia Association of Realtors) Form K1008, Rental Application included in subsequent pages.

On page 2 of 4 is summary of NVAR criteria and required documents.

Item 10 and [B] on page 4 of 4 - All adults (18+) need to be listed as applicants.

Item 4 – Proof of current income, employment covered with documents No. 1, 5, 6, 7.

Item 7 – valid photo identification covered with document No. 3

On page 2 of 4 Current street address – covered with documents No. 1, 2, 4,

******* Please make sure these are included: *******

1. recent 3 pay slips. If changed job, need offer letter and last 3 paystubs from previous employer. Additional Income proof – letter for retirement / social security / disability; court signed document for child support, or bank statements with deposit amounts.
2. last 3 rental payment / mortgage payment / rent receipt / processed bank check copies,
3. driver license or passport pages copy with photo and date of birth shown for photo identification.
4. any one utility (gas, electric, cable, telephone) bill copy, bank statement.
5. W2 or Form 1099 copy of last 1 year.
6. Tax filing form 1040 for last 1 year, and business tax return / income.
7. Social Security Number card copy / IRS Tax Identification Number (TIN) copy / IRS SS4 letter copy / signed W9 for all applicants.
8. Only for Section 8 applicants, include Section8 office signed voucher copy and signed RTA copy.

[A] - If in past had foreclosure / bankruptcy please list reason and date.

Earnest Money Deposit = amount to show applicants have funds to proceed. After lease signing this is applied towards security deposit and then to initial month's rent.

For greater attractiveness to your application you can offer HIGHER security deposit amount on page 1 of 4. Leave the address in "offer to rent" blank and you can be considered for all available houses or use this same NVAR application with other owners.

If needed, make copies of W9 form for each applicant.

NO waterbeds allowed. NO pets allowed without pre-approval.

Availability of yard is NOT approval to get pets after moving to the house. If pets are found without signed Pet Addendum the tenant hereby authorizes pets to be removed at tenant's cost.

Tenant hereby agrees to pay for repainting, recarpeting and cosmetics for the interior of the house as desired by future tenants due to tenant damages, pets presence on property.

Pets allowed on case by case basis only with signed pet addendum at start of the lease.

Tenant has to buy tenant's insurance policy with pets included about \$200 a year.

You can get free online report from www.freecreditreport.com and provide a copy. It takes less than 5 minutes.

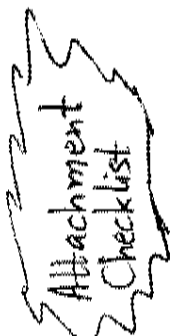
If in doubt please feel free to call 703-334-6247.

We can also provide personalized / additional upgrades as desired by tenants with one time upfront cost paid by tenants or adjusted monthly rent.

Tenant's security deposit is placed in interest bearing account.

We will NOT accept PNC bank cashier's checks !!!!

www.VirginiaRS.com



Needed with Attachments

RENTAL APPLICATION

This Rental Application ("Application") is an offer to rent. The Lease is a legally binding contract.

It is unlawful to discriminate on the basis of race, color, religion, national origin, sex, elderliness, familial status, or handicap. It is also unlawful to discriminate against all classes protected by the laws of any applicable local jurisdictions and the REALTOR® Code of Ethics. This application will be processed in accordance with occupancy laws.

BROKERAGE DISCLOSURE

Applicants acknowledge by their initials that in this real estate leasing transaction Listing Broker, _____, represents Landlord and that Leasing Broker, _____, represents Landlord OR Tenant. (If Broker is acting as a dual or designated representative, then the appropriate disclosure form is attached to and made a part of this Application).

Applicant(s) Initials _____ / _____

Leasing Agent must attach a business card.

Applicant(s) Identification Type & Expiration Date: _____

OFFER TO RENT

_____ ("Applicant 1") and _____ ("Applicant 2") offer to lease the property known as _____ (the "Premises"), for _____ years/months beginning _____, for the monthly rent of \$ _____ payable in advance on the first day of each month.

Security deposit offered is \$ _____ **CONDITIONS**

A NON-REFUNDABLE PROCESSING FEE OF \$ _____ per Applicant is included with this Application. Processing may take up to five (5) business days to complete. **AN EARNEST MONEY DEPOSIT** of \$ _____ (the "Deposit") is included and will be held by _____. If this Application is accepted and a lease is signed, the Deposit will be credited to amounts owed to Landlord. If this Application is not accepted, the Deposit will be returned to Applicant(s) less any additional documented processing charges. Funds held by an escrow agent will be deposited no later than five (5) business banking days after Application has been approved.

Occupancy is subject to possession being delivered by the present occupant. **The Premises are accepted "As-Is" unless otherwise noted below or by attachment.**

Section 8 Tenant: *Yes/No* Last house *HAD* Rent: \$ _____ Tenant Rent Portion: \$ _____
CONTACT INFORMATION: *Notice date to current owner:* _____ Unit Size on Voucher: _____

APPLICANT 1

C: _____

H: _____

W: _____

Email: _____

APPLICANT 2

C: _____

H: _____

W: _____

Email: _____

OFFICE USE ONLY

Application Received Date _____ Time _____

Application Reviewed By _____

Approved Rejected Withdrawn Applicant or Agent notified Date _____ Time _____

APPLICANTS AGREE AND UNDERSTAND THAT:

1. This Application, each occupant and each pet are subject to acceptance and approval by Landlord.
2. Listing Broker is obligated to present all Applications to Landlord until a lease is signed.
3. Landlord and Listing Broker may rescind acceptance and resume marketing the Premises at any time until a lease is signed.
4. Proof of current income is required. For example:
 - a. Latest Pay Statements/Stubs
 - b. Last 2 years' Form W-2 for hourly or weekly pay persons
 - c. Last 2 years' Form 1040 and Schedule C (if applicable) of self-employed or persons with tip income
 - d. Copy of LES and orders for military
5. This Application consists of four (4) pages which must be completed in full. Incomplete or missing information will result in delay of a decision. Willful misrepresentation may be grounds for invalidating a lease.
6. A draft of the proposed lease may be reviewed through Listing Broker. If Landlord and Applicant(s) cannot agree on terms, the Deposit will be returned.
7. Applicant(s) must present valid photo identification or two (2) forms of ID before signing the lease.
8. Applicant(s) is responsible for obtaining property and liability insurance (Renter's Insurance) and assuming utility accounts where required before occupying the Premises.
9. Any move-in fees and utility deposits are the responsibility of Applicant(s).
10. Only those persons listed in Application are to live in the Premises.
11. The Premises are not to be used for business except with full knowledge and consent of Landlord and in conformity with all applicable laws and regulations.
12. Applicant(s) has no leasehold interest until a lease is signed.

I/we agree to the above conditions and authorize the firm processing this Application to verify any information contained herein and to perform any credit or investigative inquiries necessary to properly evaluate this Application, and any renewal. If any information is found to be false or misleading, the Application may be rejected.

Applicant 1 Signature _____ Date _____ Applicant 2 Signature _____ Date _____

APPLICANT 1

Full Name _____
 Date of Birth _____ SSN/TIN _____
 Current Street Address _____
 City _____ State _____ Zip _____
 From: _____ To: _____ \$ _____
 Dates of Occupancy _____ Rent Mortgage
 Landlord/Management/Mortgage Co. Name _____
 Phone # _____ Email _____

Reason for Moving _____
 Realtor name (if used): _____
 Realtor Phone No: _____

APPLICANT 2

Full Name _____
 Date of Birth _____ SSN/TIN _____
 Current Street Address _____
 City _____ State _____ Zip _____
 From: _____ To: _____ \$ _____
 Dates of Occupancy _____ Rent Mortgage
 Landlord/Management/Mortgage Co. Name _____
 Phone # _____ Email _____

Reason for Moving _____
 Realtor name (if used): _____
 Realtor Phone No: _____

*: use blank sheet to list previous address to cover 3 years duration.

APPLICANT 1

* Previous Street Address

City State Zip

From: To: \$
 Dates of Occupancy Rent Mortgage

Landlord/Management/Mortgage Co. Name

Phone # Email

Reason for Moving

Realtor Name: **EMPLOYMENT**

1. Current Company Name

Location Address From: To: Dates of Employment

\$ /year
 Position/Rank Income

Supervisor Name Office Phone

2. Previous Company Name

Location Address From: To: Dates of Employment

\$ /year
 Position/Rank Income

Supervisor Name Office Phone

ADDITIONAL INCOME

Source \$ Amount /year

APPLICANT 2

Previous Street Address

City State Zip

From: To: \$
 Dates of Occupancy Rent Mortgage

Landlord/Management/Mortgage Co. Name

Phone # Email

Reason for Moving

Realtor Name: **EMPLOYMENT**

1. Current Company Name

Location Address From: To: Dates of Employment

\$ /year
 Position/Rank Income

Supervisor Name Office Phone

2. Previous Company Name

Location Address From: To: Dates of Employment

\$ /year
 Position/Rank Income

Supervisor Name Office Phone

ADDITIONAL INCOME

Source \$ Amount /year

DEBTS (List major loans or credit card debt) child support, judgments etc.

Type of Loan	Creditor	Balance	Monthly Payment
1.			
2.			

ASSETS (Submit supporting documentation if necessary for qualification)

Type of Asset	Value
1.	
2.	

ADDITIONAL INFORMATION

Do you plan to bring a waterbed or large aquarium into the Premises? Yes No
 Do you intend to smoke or permit smoking in the Premises? Yes No

PLEASE ANSWER

- | | <u>Applicant 1</u> | <u>Applicant 2</u> | <u>Explanation*</u> |
|---|--|--|---------------------|
| 1. Have you ever filed for bankruptcy? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 2. Have you ever been evicted? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 3. Do you have any judgments? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 4. Have you had a foreclosure? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 5. Are you party to a lawsuit? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 6. Do you pay alimony or child support? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 7. Are you a co-signer for a loan or another lease? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 8. Have you ever had a rental application rejected? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 9. Will you require a visual smoke detector? <i>(tenant paid)</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 10. Are you entitled to diplomatic immunity | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |

*Attach separate sheet if necessary.

(A) Attach sheet to explain YES above, evictions, bankruptcy, foreclosure reasons & date.

Do you have any animals? **LIABILITY COVERAGE IS REQUIRED FOR DOGS.**

TYPE	BREED	AGE	WEIGHT	M/F	NEUTURED/DECLAWED
					/
					/
					/

Do you have any vehicles?

VEHICLE: TYPE, MAKE, MODEL	STATE	'License' Plate Details	Registration Copy

(B) OTHER OCCUPANTS OF THE PREMISES
 (Occupants over 18 must submit separate applications)

LAST NAME	FIRST NAME AND M.I.	M/F	D.O.B.	RELATIONSHIP

DESIGNATED CONTACTS (Someone who knows how to reach you) **OR NEXT-OF-KIN** *(not staying with you)*

1. Name _____ Relationship _____ Email _____

Telephone _____ Address _____ City _____ State _____ Zip _____

2. Name _____ Relationship _____ Email _____

Telephone _____ Address _____ City _____ State _____ Zip _____



Form W-9 (Rev. October 2007) Department of the Treasury Internal Revenue Service	<h2 style="margin:0;">Request for Taxpayer Identification Number and Certification</h2>	Give form to the requestor. Do not send to the IRS.
Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name, if different from above	
	Check appropriate box: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) ▶	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	City, state, and ZIP code	
List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number	
OR	
Employer identification number	

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

Needed with attachments

For Applicants 3 & 4

RENTAL APPLICATION

This Rental Application ("Application") is an offer to rent. The Lease is a legally binding contract.

It is unlawful to discriminate on the basis of race, color, religion, national origin, sex, elderliness, familial status, or handicap. It is also unlawful to discriminate against all classes protected by the laws of any applicable local jurisdictions and the REALTOR® Code of Ethics. This application will be processed in accordance with occupancy laws.

BROKERAGE DISCLOSURE

Applicants acknowledge by their initials that in this real estate leasing transaction Listing Broker, _____, represents Landlord and that Leasing Broker, _____, represents Landlord OR Tenant. (If Broker is acting as a dual or designated representative, then the appropriate disclosure form is attached to and made a part of this Application).

Applicant(s) Initials _____ / _____

Leasing Agent must attach a business card.

Applicant(s) Identification Type & Expiration Date: _____

OFFER TO RENT

("Applicant 4") offer to lease the property known as _____
(the "Premises"), for _____ years/months beginning _____, for the monthly
rent of \$ _____ payable in advance on the first day of each month.

Security deposit offered is \$ _____ **CONDITIONS**

A NON-REFUNDABLE PROCESSING FEE OF \$ _____ per Applicant is included with this Application. Processing may take up to five (5) business days to complete. **AN EARNEST MONEY DEPOSIT** of \$ _____ (the "Deposit") is included and will be held by _____. If this Application is accepted and a lease is signed, the Deposit will be credited to amounts owed to Landlord. If this Application is not accepted, the Deposit will be returned to Applicant(s) less any additional documented processing charges. Funds held by an escrow agent will be deposited no later than five (5) business banking days after Application has been approved.

Occupancy is subject to possession being delivered by the present occupant. The Premises are accepted "As-Is" unless otherwise noted below or by attachment.

Section 8 Tenant, Yes/No. *Last houseHA Rent: \$ _____* Tenant Rent Portion: \$ _____
Unit Size on Voucher: _____

CONTACT INFORMATION:

APPLICANT 3

C: _____
H: _____
W: _____
Email: _____

APPLICANT 4

C: _____
H: _____
W: _____
Email: _____

OFFICE USE ONLY

Application Received Date _____ Time _____
Application Reviewed By _____
Approved Rejected Withdrawn Applicant or Agent notified Date _____ Time _____

APPLICANTS AGREE AND UNDERSTAND THAT:

1. This Application, each occupant and each pet are subject to acceptance and approval by Landlord.
2. Listing Broker is obligated to present all Applications to Landlord until a lease is signed.
3. Landlord and Listing Broker may rescind acceptance and resume marketing the Premises at any time until a lease is signed.
4. Proof of current income is required. For example:
 - a. Latest Pay Statements/Stubs
 - b. Last 2 years' Form W-2 for hourly or weekly pay persons
 - c. Last 2 years' Form 1040 and Schedule C (if applicable) of self-employed or persons with tip income
 - d. Copy of LES and orders for military
5. This Application consists of four (4) pages which must be completed in full. Incomplete or missing information will result in delay of a decision. Willful misrepresentation may be grounds for invalidating a lease.
6. A draft of the proposed lease may be reviewed through Listing Broker. If Landlord and Applicant(s) cannot agree on terms, the Deposit will be returned.
7. Applicant(s) must present valid photo identification or two (2) forms of ID before signing the lease.
8. Applicant(s) is responsible for obtaining property and liability insurance (Renter's Insurance) and assuming utility accounts where required before occupying the Premises.
9. Any move-in fees and utility deposits are the responsibility of Applicant(s).
10. Only those persons listed in Application are to live in the Premises.
11. The Premises are not to be used for business except with full knowledge and consent of Landlord and in conformity with all applicable laws and regulations.
12. Applicant(s) has no leasehold interest until a lease is signed.

I/we agree to the above conditions and authorize the firm processing this Application to verify any information contained herein and to perform any credit or investigative inquiries necessary to properly evaluate this Application, and any renewal. If any information is found to be false or misleading, the Application may be rejected.

Applicant 3 Signature _____ Date _____ Applicant 4 Signature _____ Date _____

APPLICANT-3

Full Name _____

Date of Birth _____ SSN/TIN _____

Current Street Address _____

City _____ State _____ Zip _____

From: _____ To: _____ \$ _____
 Dates of Occupancy _____ Rent Mortgage

Landlord/Management/Mortgage Co. Name _____

Phone # _____ Email _____

Reason for Moving _____

Realtor name (if used): _____
 Realtor Phone No: _____

APPLICANT-4

Full Name _____

Date of Birth _____ SSN/TIN _____

Current Street Address _____

City _____ State _____ Zip _____

From: _____ To: _____ \$ _____
 Dates of Occupancy _____ Rent Mortgage

Landlord/Management/Mortgage Co. Name _____

Phone # _____ Email _____

Reason for Moving _____

Realtor name (if used): _____
 Realtor Phone No: _____

Initials
 Tenant: _____

* use blank sheet to list previous street address to cover 3-years duration.

APPLICANT 3

APPLICANT 4

* **Previous Street Address**

City _____ State _____ Zip _____

From: _____ To: _____ \$ _____

Dates of Occupancy _____ Rent Mortgage

Landlord/Management/Mortgage Co. Name _____

Phone # _____ Email _____

Previous Street Address

City _____ State _____ Zip _____

From: _____ To: _____ \$ _____

Dates of Occupancy _____ Rent Mortgage

Landlord/Management/Mortgage Co. Name _____

Phone # _____ Email _____

Reason for Moving
 Realtor Name: **EMPLOYMENT**

Reason for Moving
 Realtor Name: **EMPLOYMENT**

1. Current Company Name _____

Location Address _____ From: _____ To: _____
 Dates of Employment _____

Position/Rank _____ \$ _____ /year
 Income _____

Supervisor Name _____ Office Phone _____

1. Current Company Name _____

Location Address _____ From: _____ To: _____
 Dates of Employment _____

Position/Rank _____ \$ _____ /year
 Income _____

Supervisor Name _____ Office Phone _____

2. Previous Company Name _____

Location Address _____ From: _____ To: _____
 Dates of Employment _____

Position/Rank _____ \$ _____ /year
 Income _____

Supervisor Name _____ Office Phone _____

2. Previous Company Name _____

Location Address _____ From: _____ To: _____
 Dates of Employment _____

Position/Rank _____ \$ _____ /year
 Income _____

Supervisor Name _____ Office Phone _____

ADDITIONAL INCOME

ADDITIONAL INCOME

Source _____ \$ _____ /year
 Amount _____

Source _____ \$ _____ /year
 Amount _____

DEBTS (List major loans or credit card debt) *child support, judgments etc.*

Type of Loan	Creditor	Balance	Monthly Payment
1. _____	_____	_____	_____
2. _____	_____	_____	_____

ASSETS (Submit supporting documentation if necessary for qualification)

Type of Asset	Value
1. _____	_____
2. _____	_____

ADDITIONAL INFORMATION

Do you plan to bring a waterbed or large aquarium into the Premises? Yes No
 Do you intend to smoke or permit smoking in the Premises? Yes No

PLEASE ANSWER

- | | <u>Applicant 3</u> | <u>Applicant 4</u> | <u>Explanation*</u> |
|---|--|--|---------------------|
| 1. Have you ever filed for bankruptcy? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 2. Have you ever been evicted? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 3. Do you have any judgments? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 4. Have you had a foreclosure? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 5. Are you party to a lawsuit? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 6. Do you pay alimony or child support? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 7. Are you a co-signer for a loan or another lease? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 8. Have you ever had a rental application rejected? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 9. Will you require a visual smoke detector? <i>tenant paid</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 10. Are you entitled to diplomatic immunity | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |

*Attach separate sheet if necessary.

(A) 11. How would you rate your credit?
 Attach sheet to explain YES above, evictions, bankruptcy, foreclosure reasons & date.

Do you have any animals? **LIABILITY COVERAGE IS REQUIRED FOR DOGS.**

TYPE	BREED	AGE	WEIGHT	M/F	NEUTURED/DECLAWED
					/
					/
					/

Do you have any vehicles?

VEHICLE: TYPE, MAKE, MODEL	STATE	License	Plate Details	Registration Copy

(B) **OTHER OCCUPANTS OF THE PREMISES**
 (Occupants over 18 must submit separate applications)

LAST NAME	FIRST NAME AND M.I.	M/F	D.O.B.	RELATIONSHIP

DESIGNATED CONTACTS (Someone who knows how to reach you) **OR NEXT-OF-KIN** (not staying with you)

1. Name _____ Relationship _____ Email _____
 Telephone _____ Address _____ City _____ State _____ Zip _____

2. Name _____ Relationship _____ Email _____
 Telephone _____ Address _____ City _____ State _____ Zip _____



Initials _____
 Tenant: _____
 Rental app _____

Form W-9
 (Rev. October 2007)
 Department of the Treasury
 Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the
 requester. Do not
 send to the IRS.

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name, if different from above	
	Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) ▶	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	City, state, and ZIP code	
List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number : : :
or
Employer identification number : : :

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here

Signature of U.S. person ▶

Date ▶

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued).
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,