REALTY ONE GROUP
A Team of Professionals™

RENTAL APPLICATION

EQUAL HOUSING OPPORTUNITY

REQUIRED TO SUBMIT:
(Cash, MO, CC)
Application (Non-Refundable)
Fee $ _____
Deposit to Hold $ _____
Amt. Received $ _____

Application is not complete until page 4 is signed. Unless this application is initialed on each page it will not be processed. (If more than two persons are applying, use additional applications.)

PROPERTY ADDRESS _____

CITY, STATE, ZIP _____

MOVE-IN DATE _____

(NON-REFUNDABLE) APPLICATION FEE $ 40 per adult RENT $ See MLS SECURITY DEPOSIT $ 1 MONTH RENT PET DEPOSIT $ 250 per pet (NON-REFUNDABLE) PROCESSING FEE $ N/A

KEY DEPOSIT $ N/A CLEANING FEE $ 250 OTHER $ _____

EVIDENCE BY: CASH XX CHECK NO CASHIER'S CHECK XX MONEY ORDER XX

**XXXX

SALARY: $ _____ PER/MO SUPERVISOR: _____

OTHER INCOME: SOURCE _____ AMOUNT: $ _____

PRIOR EMPLOYER (IF LESS THAN 3 YEARS): _____ PHONE # _____

HOW LONG? _____ EMPLOYED AS _____

SALARY: $ _____ PER/MO SUPERVISOR: _____

CREDIT REFERENCES: BANK _____ ACCT.# _____

ADDRESS _____

**XXXX

CREDIT REFERENCES: BANK _____ ACCT.# _____

ADDRESS _____

XXXX

HOW LONG DOES APPLICANT PLAN TO LIVE HERE? _____ DOES APPLICANT PLAN TO USE LIQUID FILLED FURNITURE? NO TYPE NO LIQUID FILLED FURNITURE ALLOWED.

DOES ANYONE IN THE HOUSEHOLD SMOKE? Y/N N-Only

APPLICANT IN CASE OF EMERGENCY, PERSON TO NOTIFY: _____

RELATIONSHIP: _____ *PHONE #* _____

CO-APPLICANT IN CASE OF EMERGENCY, PERSON TO NOTIFY: _____

RELATIONSHIP: _____ *PHONE #* _____

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

DISCLOSURE

PLEASE READ CAREFULLY BEFORE SIGNING

1. APPLICANT UNDERSTANDS THAT AMBER (EILERS) HARRYMAN IS THE LEASING AGENT AND REPRESENTATIVE FOR THE LANDLORD OF THE PREMISES LOCATED AT _____ AT A MONTHLY RENT OF $ _____ .
2. APPLICANT DECLARES THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT, AND APPLICANT AUTHORIZES AN EMPLOYMENT CHECK, CRIMINAL RECORDS CHECK, CREDIT CHECK, VERIFICATION OF REFERENCES AND CURRENT AND PREVIOUS LANDLORDS.
3. APPLICANT HEREBY PAYS $ 40 per adult AS A NON-REFUNDABLE APPLICATION FEE AND $ N/A AS HOLDING DEPOSIT. IF APPLICANT IS DECLINED, HOLDING DEPOSIT SHALL BE REFUNDED WITHIN N/A BUSINESS DAYS. IF, AFTER APPROVAL, APPLICANT DECIDES NOT TO FULFILL THIS AGREEMENT BY COMPLETING LEASE AND PAYING FIRST MONTHS RENT AND REMAINING SECURITY DEPOSIT, HOLDING DEPOSIT SHALL BE RETAINED BY LANDLORD TO COVER ADMINISTRATIVE EXPENSES.
4. APPLICANT AGREES TO EXECUTE A RENTAL AGREEMENT BEFORE POSSESSION IS GIVEN AND TO PAY THE RENT AND SECURITY DEPOSIT WITHIN 1 (one) BUSINESS DAYS AFTER BEING NOTIFIED OF ACCEPTANCE OF THIS APPLICANT.
5. LANDLORD AND AGENT WILL NOT BE BOUND BY ANY REPRESENTATIONS, AGREEMENTS OR PROMISES, WRITTEN OR ORAL, MADE BY LANDLORD OR AGENT UNLESS CONTAINED IN THE RENTAL AGREEMENT SIGNED BY LANDLORD OR LANDLORD'S AGENT.
6. APPLICANT DOES HEREBY RELEASE LANDLORD, AGENT AND THIS COMPANY FROM ANY AND ALL DAMAGES OR LIABILITIES WHICH MIGHT RESULT FROM THE ABOVE INFORMATION. APPLICANT RELEASES PRESENT LANDLORD AND ALL PREVIOUS LANDLORDS FROM ANY AND ALL LIABILITY FOR ANY DAMAGE OR INJURY WHATSOEVER CAUSED BY PROVIDING INFORMATION TO LANDLORD OR AGENT REGARDING APPLICANT.
7. APPLICANT UNDERSTANDS AND ACKNOWLEDGES THAT A FALSE STATEMENT MADE HEREIN IS GROUNDS FOR DENIAL OF RENTAL TO APPLICANT. ANY STATEMENT HEREIN MAY BE CONSTRUED AS A CONDITION PRECEDENT TO ANY BINDING RENTAL AGREEMENT OR CONTRACT BETWEEN APPLICANT AND LANDLORD.
8. APPROVAL FOR RESIDENCY IS MADE WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, OR HANDICAP.
9. APPLICANT UNDERSTANDS THAT APPLICANT ACQUIRES NO RIGHTS TO PREMISES UNTIL EXECUTION OF A RENTAL AGREEMENT IN THE FORM SUBMITTED AND DEPOSIT OF RENT AND SECURITY DESCRIBED ABOVE.

SIGNATURE OF APPLICANT _____ ***DATE*** _____ ***TIME*** _____

SIGNATURE OF CO-APPLICANT _____ ***DATE*** _____ ***TIME*** _____

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

OFFICE USE ONLY:

REFERRAL COMPANY _____ MLS # _____ DATE PAID _____

AGENT: _____ P.I.D. # _____ LICENSE # _____

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