2724 LFH Loft Apartment

APPLICATION FOR LEASE

(This is a legally binding contract. If not understood, seek competent advice before signing.) This Application for Lease (the "Application") is made as of the _____ day of ____ ("Applicant(s)") and by and between Sue and Dave Hickman ("Landlord" - P.O. Box 646 Berryville, VA 22611; cell phone# 540.327.0135; email SGH@UsingHisGifts.com) Applicant hereby applies to rent the Loft Apartment ("Dwelling Unit") located at 2724 Lord Fairfax Highway, in Berryville, VA located in the County of Clarke, for occupancy commencing on ______, at an initial monthly rent payment of ______ Dollars (\$______). PLEASE FILL IN ALL INFORMATION COMPLETELY 1. Applicant: SSN SSN Date of Birth_____ Cell Phone #_____ Email: ______ Present Address: _____ Street, City, State, Zip Years: _____ Landlord: _____ Landlord Tel#:_____ Presently Employed By: ______ How long? _____ Position: ______ Salary \$ _____ (Wk., Mo., Yr.) Supervisor: ______ Telephone#: _____ Formerly Employed By: ______ How long? _____ Supervisor: ______ Telephone#: _____ 2. Co- Applicant: ______ SSN_____ Date of Birth_____ Cell Phone #_____

	Street, City, St	ate, Zip
١	Years: Landlord:	Landlord Tel#:
F	Presently Employed By:	How long?
F	Position:	Salary \$ (Wk., Mo., Yr.)
9	Supervisor:	Telephone#:
F	Formerly Employed By:	How long?
9	Supervisor:	Telephone#:
1	Number of Vehicles:	
	f you are presently in the Armed	
	Applicant	Co-Applicant
ı	Branch:	Branch:
F	Rank:	Rank:
(Outfit:	Outfit:
7	Геlephone:	Telephone:
(Other income:	
,	Applicant	Co-Applicant
,	Amount \$	Amount \$
F	Per:	Per:
9	Source:	Source:
		debts now outstanding (attach additional sheet, if necessa
	Creditor Address	Account # Monthly Payr

					Address	
	Sav	rings Account No.	Bank		Address	
	Aut	comobile: Make / Yr.	Model	Financed by and Address	Mo. Payment	License#
	Aut	comobile: Make / Yr.	Model	Financed by and Address	Mo. Payment	License#
7.		Case of Emergency, n me/Relationship	otify:	Address	ı	Phone #
 8. 9. 	Application Fee/Third-Party Costs/Application Deposit: An Application Deposit of					
				dence:		
	(b)	Has any Applicant e	ver been rej	jected for tenancy? Yes N	o If yes, ple	ase explai
	(c) Has any Applicant ever refused to pay rent when due, been a defendant in an unlawful detainer action or eviction, or otherwise been sued by a landlord for matters related to a tenancy? Yes No If so, please give details, and the status of any pending action:					
	(d)	Has any Applicant e	ver filed for	bankruptcy? Yes No	. If so, please give	e dates of

	Name:		Phone#				
	Name: Phone#						
(e provide the following information if the Lease Agreement will be guaranteed: e/ Relationship of Guarantor:					
	Name/ Relationsr	Date of Birth	Phone#				
		Date of birth					
	Name/ Relationsh	nip of Guarantor:					
	Address:						
n ji Ii ji	no contest to any felourisdiction? Yes If yes, please give all of	minal History: Has any Applicant ever been convicted of, plead guilty to, or entered a plea of contest to any felony or to any misdemeanor involving a crime of moral turpitude in any soliction? Yes No es, please give all details, including the specific offense(s), date(s), sentence(s), and soliction(s) in which the offenses occurred, as well as any information on the status of any rent probation.					
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h c a p	formation Correct: Applicant(s) hereby certifies that the information contained in this oplication is true and correct to the best of Applicant's knowledge and belief. Applicant(s) creby authorizes Landlord to conduct a credit check on Applicant(s) and such background necks as determined appropriate to verify information provided herein by Applicant(s) for approval or rejection of this Application and agreed to pay for the third party costs identified in a ragraph 8 above.						
- - -							
		and conditions of this Application. \ the LEASE AGREEMENT.	We understand this is a binding con	tract			
Signa	nture of Applicant		Date				
Signa	nture of Guarantor		Date				
Signa	ature of Guarantor		Date				