

LEASE APPLICATION

All occupants 18 and over must sign lease application version 2011.01.12

APPLICATION for occupancy of _____ Application submitted: _____
to Peggy Rahe _____ Property Manager or Agent or Realtor , P.O. Box 576, Springboro, Ohio
Phone (937) 361-9599 e-fax 866-241-5201

I (we) authorize the investigation of related facts and the exchange of reports regarding this application with credit reporting agencies and others. On request I (we) will be told each agency's name and address. Investigation can take 5 full working WEEK days following receipt of application. It may also be done within 1 day depending on the company who does the research.

INSTRUCTIONS: A response is required for each blank. Use N/A if not applicable. If married less than two years or not to each other, each must make a separate application. Please print except for signature. Use full names and initials. If currently living with relatives use last previous address as present address.

Please submit:

- 1 Recent pay Stub 1 Pay stub from 3 months ago from employer applicant and co-applicant(s)
- Proof of child support, SSI or SSD applicant and co-applicant(s)
- 1 copy of current driver license for applicant and co-applicant(s)
- Good phone numbers for past 3 landlords and current employer(s)

Martial Status

MARITAL STATUS Single / Married since (date) _____ Divorced since (date) _____ Separated (date) _____

Former Spouse Name _____

List all former Full names including Initials used and dates used _____

APPLICANT NAME: _____ | Birth date: _____ SS # _____

DRIVERS LICENSES: State issued _____ # _____ | DRIVERS LICENSES: State issued _____ # _____

INCOME: Last year \$ _____ Weekly/INCOME: Last year \$ _____ Other in come \$ _____

.....
APPLICANTS PRESENT ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

CURRENT LANDLORD: _____ ADDR: _____ CITY: _____ STATE: _____ ZIP: _____

Rent/Month \$ _____ LANDLORD'S PHONE No: _____ YOUR PHONE HOME: _____

WORK: _____ SUPERVISORS NAME _____

Is present rent up to date? Yes No Have you given notice? Yes No Have you been asked/told to leave? Yes No

.....
YOUR PAST ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PAST LANDLORD: _____ ADDR: _____ CITY: _____ STATE: _____ ZIP: _____

Rent/Month \$ _____ From _____ To _____ LANDLORD'S PHONE NUMBER _____

Your home phone number: _____ work: _____ cell phone _____

Spouse phone at work: _____

.....
Check applicable boxes. Explain any "YES" answers on back with names and details.

- | | |
|---|---|
| Have you ever been sued for bills? <input type="checkbox"/> Yes <input type="checkbox"/> No | Any any lawsuit against you ever? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you ever filed for bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No | Have you ever been guilty of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Are you planning on filing bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No | Have you ever changed your name? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Did you do a debt consolidation loan? <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes what date did you initiate? _____ |
| Have you ever willfully or intentionally refused to pay rent when due? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you ever been convicted for dealing or manufacturing of illegal drugs? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you ever been served an eviction notice or been asked to vacate a property..... | <input type="checkbox"/> Yes <input type="checkbox"/> No |

OCCUPANTS how many people will occupy this property part time or full time? ____

Names & Birth dates:

- 1. _____ BIRTHDATE _____
- 2. _____ BIRTHDATE _____
- 3. _____ BIRTHDATE _____
- 4. _____ BIRTHDATE _____

Does anyone who will reside in rental unit have any handicap that will require modification of the unit? Yes No
 Does anyone who will reside in rental unit smoke? Yes No this is classified as a **NON SMOKING PROPERTY**
 Do you have pets Yes No If yes, give details on the back (number, type and size). No pets are permitted without written permission from the landlord. There are **NO** exceptions. Security deposit will be forfeited if you violate any rules.

Automobiles:

#1 Model/Color _____ State _____ License Plate #1 _____

Lien Holder _____ City & State _____

#1 Model/Color _____ State _____ License Plate #1 _____

Lien Holder _____ City & State _____

Employment

Your current employer: _____ address: _____

City State and Zip _____

Supervisor Name _____ Phone number _____

Work hours _____ work phone number _____

How long have you been with this employer? _____

Previous employer: _____ address: _____

City State and Zip _____

Supervisor Name _____ Phone number _____

Work hours _____ work phone number _____

How long have you been with this employer? _____

Current history of renting:

Number of bedrooms rented _____ Reason for leaving current rental _____

Do you pay the following (where you currently live): circle one:

Gas: Yes or No **Electric:** Yes or No **Water:** Yes or No **Lawn cutting:** Yes or No **Landscape:** Yes or No **Trash:** Yes or No

Name used for billing of gas electric and water

Name of your attorney _____ Phone number _____

How long do you plan on living at this property _____ Would you like to purchase a home within the next 2 years? _____

Any statements or information that is false will immediately terminate lease or application. You will automatically lose any application fees, deposits or rents paid.
FILL OUT ENTIRE APPLICATION TO BE CONSIDERED.

APPLICANTS REFERENCES:

Applicant's Relative _____ Relation _____

Home Phone _____ Work Phone _____ Address _____

Non-Relative _____ Relation _____

Home Phone _____ Work Phone _____

Address _____

Your Mother's Maiden Name: _____ Spouse's Mother's Maiden Name: _____

Who to notify for emergency: Name _____ Relation _____

YOUR CURRENT Phone Number _____ **Second Phone Number** _____

Your Doctors name for : _____ Phone _____

CREDIT ACCOUNTS - Current (open) including credit card(s).

NAME	ADDRESS	ACCOUNT#	PAYMENT
CURRENT			\$
<input type="checkbox"/> YES <input type="checkbox"/> NO			
			\$
<input type="checkbox"/> YES <input type="checkbox"/> NO			
			\$
<input type="checkbox"/> YES <input type="checkbox"/> NO			
			\$
<input type="checkbox"/> YES <input type="checkbox"/> NO			
			\$
<input type="checkbox"/> YES <input type="checkbox"/> NO			

CHECKING and SAVINGS ACCOUNTS

NAME	ADDRESS	ACCOUNT#	
CURRENT			\$
<input type="checkbox"/> YES <input type="checkbox"/> NO			
			\$
<input type="checkbox"/> YES <input type="checkbox"/> NO			

It is understood that a rental application fee of \$50.00 is collected to pay for the investigation and is NOT refundable. If approved, landlord will collect and a separate security deposit that is held until rental property condition is approved per rental agreement specifications, after final vacancy. Once you have been approved and paid your deposit and first month's rent there are no refunds if you decide not to take the property. You may also be subject to damages such as loss of rents and expense to re-rent said property.

Submission of rental application and application fee of \$50.00 per occupant over 18 years old is hereby acknowledged per applicant. Pets by agreement only. No vicious breeds of dogs are ever allowed on this property.

Where can we contact you once we know you have been approved or we have questions?

Work: _____ Home: _____

Applicants email address _____

Please print this information so we can read it. Your email information is not shared.

To Whom It May Concern

UNDERSIGNED APPLICANTS AUTHORIZE ANY PERSON OR FIRM TO RELEASE INFORMATION CONCERNING THEIR CREDIT AND PAYMENT HISTORY UPON PRESENTATION OF THIS FORM OR A PHOTO COPY OF THIS FORM, AT ANY TIME.

I hereby authorize Peggy Rahe or her agents or representatives to obtain information concerning my past, current and future credit, rental and employment history, and to answer any questions in the future regarding their experience with Peggy or her agents. I hereby authorize any of the following sources, including but not limited to (1) credit reporting agencies (2) public or privately owned utility companies (3) government housing (4) current and past landlords, employers or creditors to release any said information to the above named party.

I hereby authorize release of any of the above sources, their officers, agents or employees from any liability for damages of any kind whatsoever, either caused by negligence or not, which may at any time result in a decision not to rent this property now or in the future by reason of compliance with the above mentioned inquiry, which may include the answering of specific questions and the giving of information concerning my (applicant and co-applicants) present or past record.

Additionally I give the above party and their agent/owner/lender permission to copy and submit this form as needed for the purpose of processing my rental application, lease, lease option or rent to own and to continue to get information for credit collections when occupying property in the future.

Applicant

Date signed

Applicants date of birth

Applicants social security

Print Your Full Name Here:

www.RaheTeam.com * Direct Dial (937)361-9599 fax: (866)241-5201