

FULL OCCUPANCY

Rental Application

WWW.FULLOCCUPANCY.NET



APPLICANT

Last Name: _____
 First Name: _____
 Middle Initial: _____
 Current Address: _____
 City: _____
 State: _____
 Zip Code: _____
 Home Phone: _____
 Work Phone: _____
 Email: _____
 Social Security #: _____
 Date of Birth: _____
 Marital Status: Single, Married, Divorced
 Separated, Widow

CO-APPLICANT

Last Name: _____
 First Name: _____
 Middle Initial: _____
 Current Address: _____
 City: _____
 State: _____
 Zip Code: _____
 Home Phone: _____
 Work Phone: _____
 Email: _____
 Social Security #: _____
 Date of Birth: _____
 Marital Status: Single, Married, Divorced
 Separated, Widow

HOUSEHOLD INFORMATION

1. List the Head of Household and another members who will be living in the unit. Give the relationship of each family member to the head.

Name	Relationship	Birth Date	Age	Gender	Soc. Sec. No.	Full Time Student?
	HEAD					<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
						<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

2. Do you expect a change in your household Composition within the next 12 months? Yes, No If yes, Please explain:

Please Return Completed Application to 927 Hull St. Richmond VA
 23224 Ph: 804-325-3797 ext 11/ Fax: 804-325-3799



.....

INCOME INFORMATION

Please answer each of the following questions. For each 'yes/no' provide details in the charts below. Does any member of your household:

- 1. Work Full time, part time, or seasonally. Yes, No
- 2. Expect to work for any period during the year?..... Yes, No
- 3. Work for someone who pays him or her cash? Yes, No
- 4. Expect a leave of absence from work due to layoff or
 medical, maternity, or military leave?..... Yes, No
- 5. Now receive or expect to receive unemployment benefits?..... Yes, No
- 6. Now receive or expect to receive child support?..... Yes, No
- 7. Entitled to child support that he/she is not now receiving?..... Yes, No
- 8. Now receive or expect to receive alimony?..... Yes, No
- 9. Have an entitlement to receive alimony that's not
 currently being received? Yes, No
- 10. Now receive or expect to receive public assistance (TANF)?..... Yes, No
- 11. Now receive or expect to receive Social Security or disability?..... Yes, No
- 12. Now receive or expect to receive income from a pension/annuity?..... Yes, No
- 13. Now receive or expect to receive regular contributions from
 organizations or individuals not living in the unit?..... Yes, No
- 14. Receive income/dividends front assets including checking,
 savings, certificates of deposit, stocks, bonds, rental property?..... Yes, No
- 15. Own real estate or any asset for which you receive no income?..... Yes, No
- 16. Now receive military pay?..... Yes, No
- 17. Now receive self employment income?..... Yes, No
- 18. Now receive workers compensation?..... Yes, No
- 19. Now receive veterans administration benefits? Yes, No
- 20. Do you have income from any source not mentioned above Yes, No
 if yes, please explain? _____

.....

EMPLOYMENT

Applicant: (Check All Applicable)

Full Time, Part Time, Self-Employed, Non-employed, Unemployed

Current Employer: _____

Position: _____ Date Hired: _____

Address: _____

Supervisor: _____ Phone: _____

Do you expect to earn substantial overtime? Yes, No. If yes, how much? _____

Amount of Wages: _____ Weekly Bi-Weekly Semi-Monthly Monthly

Co-Applicant: (Check All Applicable)

Full Time Current Employer: _____

Part Time Position: _____ Date Hired: _____

Self-Employed Address: _____

Non-employed Supervisor: _____ Phone: _____

Amount of Wages: _____ Weekly Bi-Weekly Semi-Monthly Monthly

.....

Please Return Completed Application to 927 Hull St. Richmond VA
23224 Ph: 804-325-3797 ext 11/ Fax: 804-325-3799



Unemployed Do you expect to earn substantial overtime? Yes, No. If yes, how much? _____
 Do you expect to earn substantial overtime? Yes, No. If yes, how much? _____

ASSET INFORMATION

Please answer each of the following questions. Do any household members have any of the following? If yes, indicate the value.

- Checking Account (average 6mo. balance) Yes, No \$ _____
- Savings Account Yes, No \$ _____
- Certificates of Deposit Yes, No \$ _____
- Stocks or Bonds Yes, No \$ _____
- IRA's or Retirement Funds Yes, No \$ _____
- Mutual Funds Yes, No \$ _____
- Trust Accounts Yes, No \$ _____
- Whole or Universal Life Insurance (not Term) Yes, No \$ _____
- Personal Property held as an investment Yes, No \$ _____
- Real Estate Yes, No \$ _____
- Any Assets not listed above Yes, No \$ _____
- Have you disposed of any assets in the previous 24 months for less than fair market value? Yes, No \$ _____

List all information for any asset noted above (including Checking, Savings, IRAs, Keogh accounts, and Certificates of Deposit of all household members.

BANK NAME	TYPE OF ACCOUNT	ACOUNT NUMBER	BALANCE

RENTAL HISTORY

Present Landlord: _____ Landlord's Phone No.: _____
 Landlord's Address: _____
 How long have you lived there?: _____
 Reason for leaving: _____

Former Landlord: _____ Former Landlord's Phone No.: _____
 Former Landlord's Address: _____
 How long have you lived there?: _____
 Reason for leaving: _____

OTHER INFORMATION:

Driver's License #: _____ State: _____, Expires: _____



Vehicle Year, Make, and Model: _____
License Plate Number: _____

Have you ever been evicted and/or owe any Property Management Company or Private Owner money Yes, No.

If yes please explain: _____

Have you ever been convicted of a Felony? Yes, No.

If yes please explain: _____

.....
EMERGENCY CONTACT
.....

Nearest Living Relative's Name: _____ Phone: _____

Relationship: _____ Address: _____

I hereby apply to lease the above described premises on substantially the terms set forth herein. As an inducement to FULL OCCUPANCY, LLC, Agent for the owner of the property, to accept this application, I warrant that all statements contained herein are true. I have been advised and understand that residency at this community entails certain income restrictions and that residency is subject to qualification. I hereby authorize Landlord to procure a consumer as defined in the Fair Credit Reporting Act, 15 U.S.C. 1881 a (d) seeking information on the credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living. I agree that in addition to execution of a Lease Agreement that I will execute a tenant certification attesting to the information contained herein which certification will be made under the penalty of perjury.

A deposit of \$ _____ is made herein. If the application is approved, said deposit will be held as (partial/full) security for the performance of the covenants of the lease and as a damage deposit. The full security deposit will be \$ _____. If the applicant(s) notifies the Landlord within three (3) days after the execution of this application that applicant(s) no longer wishes to rent said apartment, Landlord agrees to return said deposit in full. Landlord reserves the right to retain the security deposit if, for any reason, prospective resident withdraws the application for tenancy, if said application is withdrawn after the time limit set out in the previous sentence.

By execution of this application, I hereby authorize FULL OCCUPANCY, LLC to make such investigations into my credit history as they may deem appropriate. I understand that such investigations typically include (but are not limited to) verification of employment and salary, rental history and consumer credit reports. By signing below, the applicant gives permission to procure a criminal background check and understands the results of such background check could affect the approval of this application. The undersigned do hereby acknowledge disclosure that the licensee, FULL OCCUPANCY, LLC represents the Landlord in a real estate transaction.

RESIDENT'S DUTY TO PROVIDE TRUTHFUL & COMPLETE INFORMATION WARNING: Section 1001 of Title 18 U.S. Code makes it a criminal offense to willfully falsify a material fact or make a false statement in any matter within the jurisdiction of a federal agency. Resident acknowledges that federal law, VHDA and IRS requires Residents to answer all questions about income and student status truthfully and completely at Resident's initial certification and at each annual recertification. This information is essential for determining Resident's eligibility to occupy the Unit.

Resident understands that (s) he must give truthful and complete income and student status information at all times.

Resident understands that compliance with this paragraph is a condition of Resident's occupancy of the Unit. If Owner discovers, at any time the Lease Term, that Resident purposely gave false or incomplete income or student status information, Owner may evict Resident from the Unit.

Resident's Acknowledgement: _____ (Initial here)

Applicant: _____ Date: _____

Co-Applicant: _____ Date: _____

Management Representative: _____ Date: _____

