**Emerald Spring LLC**PO Box 35, Afton, VA 22920
434-260-1040, 434-202-4800 fax Info@EmeraldSpring.com

# RENTAL APPLICATION

## **Equal Housing Opportunity**

### Please fill out and send to us:

- Fill out application online: MyHomeFlyer.com
   or Fax: 434-202-4800
- ° or Scan and Email to: <a href="mailto:Info@EmeraldSpring.com">Info@EmeraldSpring.com</a>
- ° or use a smartphone: Take a picture of each page and email them to us at full resolution

#### For a Faster Response: Fill out an online application at MyHomeFlyer.com

Address of place you want to rent:		at a monthly rent of \$ and security deposit of \$	
Desired Move in Date	at a monthly rent of \$		
PLEASE TELL US ABOUT YOURSEL	F		
Full Name		Home Phone (	)
Date of Birth	Social Securit	y #	
Mobil Phone ( )	Email Address:		(optional)
Your Driver's License Number	State		
Co-Applicant Name	N	lames of Dependents_	
Co-Applicant Date of Birth	Social Securi	ty #	
Dependents Date of Birth			
List number and type of pets you want	to have in the rental property:_		
How did you find out about us? Sign [_	] Newspaper [] Friend [	] Other []	
N FACE CHAE DECADENTAL INCOME	DY (I A CIT 2 VIE A DC)		
PLEASE GIVE RESIDENTIAL HISTO			
Current Address	Apt#_	City	StateZip_
Month/Year Moved In	Reasons for Leaving		Rent \$
Owner/Agent		_Phone ( )	_
Previous Address (last 3 years)			Rent \$
Owner/Agent		_Phone ( )	
PLEASE DESCRIBE YOUR CREDIT H	IISTORY		
Have you declared bankruptcy in the past so Have you ever been evicted from a rental re		[ ] yes [ ] no [ ] yes [ ] no	
Have you level been evicted from a rental re Have you had two or more late rental paym		[ ] yes [ ] no	
Have you ever willfully or intentionally ref	used to pay rent when due?	[ ] yes [ ] no	
Been evicted? Been convicted of a crime?		[ ] yes [ ] no [ ] yes [ ] no	
		[ ] yes [ ] no	
PLEASE PROVIDE YOUR EMPLOYM Your Status:Full TimePart Ti		ploved	
Employer			
Dates employed			
Supervisor Name		Phone ( )	
Salary \$per	(If employed by abo	ove less than 12 month	ns, give name & phone of prev
employer or school:			.)

us to consider it in this application. Amount \$ Source/Contact Name PLEASE LIST YOUR REFERENCES **Personal Reference or Emergency Contact:** Name \_\_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_\_ Relationship\_\_\_\_\_ Driver's License: Your Driver's License Number\_\_\_\_\_ State All Vehicle that will be kept on the Property: Make / Model \_\_\_\_\_\_ Year \_\_\_\_\_License Plate State\_\_\_\_\_ Make / Model Year License Plate State Make / Model Year License Plate State ADDITIONAL INFORMATION: Do you or anyone that will be living in the home smoke? Do anyone you expect to visit frequently in the home smoke? [ ] yes [ ] no Please give any additional information that might help owner/management evaluate this application? Where may we reach you to discuss this application? Day Phone # ( )\_\_\_\_\_\_Night Phone # ( There is a Nonrefundable Rental Application fee of \$25.00 per applicant due at the time this form is submitted. Deposit can be hand delivered or mailed to: Emerald Spring LLC, PO Box 35, Afton, VA 22920 I hereby deposit \$\_\_\_\_\_ as earnest money to be refunded to me if this application is not accepted. Upon acceptance, this deposit shall be retained as part of the security deposit. If the application is not approved or accepted by the owner or agent, the deposit will be refunded, the application hereby waiving any claim for damages by reason of non-acceptance which the owner or agent may reject. I recognize that as a part of your procedure for processing my application, and investigative consumer report may be prepared whereby information is obtained through personal interviews with others with whom I may be acquainted. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living. I certify that all the information given above is true and correct and understand that my lease or rental agreement may be terminated if I have made any material false or incomplete statements in this application. I authorize verification of the information provided in this application from my credit sources, current and previous landlords and employers and personal references. Please sign: X\_\_\_\_ Name of Applicant Date Name of Co-Applicant Date

If you have other sources of income that you would like us to consider, please list income, source, and person (banker, employer, etc.) who we may contact for confirmation. You do not have to reveal alimony, child support, or spouse's annual income unless you want