

CROSS REALTY
RENTAL MANAGEMENT COMPANY
APPLICATION FOR RESIDENTIAL RENTAL
1707 N. Main St. Suffolk, VA 23434
757-539-3060 (office) 757-934-0811 (fax)



Application is hereby made to lease a residential unit from Cross Realty Rental Management Company, Inc. A deposit equal to a month's rent is required and more may be asked. The lease terms are to be for one year from the 1st of the month, unless otherwise stated.

Circle One

Applicant or Co-Signer

1. Applicant: Last name _____ First name _____ middle I _____
 SS# _____ Email address: _____
 Birth Date: _____ Phone Number: _____
 Co-Applicant: Last _____ First _____ middle I _____
 SS# _____ Relationship to Applicant _____
 Birth Date: _____ Phone Number: _____
2. Current Address: _____ city/state/zip _____
 How long did you live there _____ Reason for leaving _____
 Do you have a lease _____ If yes, Expiration Date _____ Have you given notice _____
 Current Landlord _____ Phone Number _____
 What do you pay in rent now? _____
3. Have you ever been sued for rent, evicted for nonpayment of rent, or claimed bankruptcy _____
 If yes, Explain and give dates _____ Do you have any judgments
 against you? _____ If yes, Explain _____
 Former address _____ city/state/zip _____ Former Landlord _____
 Phone _____ Rent _____ Reason for leaving _____ Do you own
 any Real Estate _____ If so, where? _____

EMPLOYMENT INFORMATION

APPLICANT	CO-APPLICANT
Occupation _____	Occupation _____
Employer _____	Employer _____
Address _____	Address _____
City/state/zip _____	City/state/zip _____
How long Employed _____	How long Employed _____
Supervisor _____	Supervisor _____
Phone _____	Phone _____
Salary \$ _____ wk/mo/yr	Salary\$ _____ wk/mo/yr
Additional Income \$ _____	Additional Income\$ _____
Source _____	Source _____

IF MILITARY, COMPLETE THE FOLLOWING

Duty Station _____	Duty Station _____
Rank/Rate _____	Rank/Rate _____
End Current Enlist _____	End Current Enlist _____
Commanding Officer _____	Commanding Officer _____
Phone _____ LES Y/N	Phone _____ LES Y/N
Home of Record _____	Home of Record _____

Applicant need not disclose alimony, child support or separation maintenance income or its source, unless applicant wishes it to be for the purpose of this application for Tenancy.

Total number of people to occupy unit _____ Age(s)/Relation to applicant _____

All tenants over the age of 18 years will sign the lease agreement.

Pets _____ Type _____ weight _____

ALL PETS MUST BE VACCINATED IF ACCEPTED IN THE UNIT BY THE OWNER

Vehicle Type _____ Year _____ License # _____

Vehicle Type _____ Year _____ License # _____

IN CASE OF EMERGENCY, NOTIFY:

Name _____ Relationship _____ Phone _____

Address _____ city/state/zip _____

Do you carry Renter's Insurance? Y or N if so, who is it with _____

The owner of the unit carries insurance on the building only. Neither the Agent nor the Owner of the property is responsible for damage to your personal property. The Owner/Agent may require you to have and provide proof of Renter's Insurance.

APPLICANTS STATEMENT:

I/We certify that the foregoing information is true and accurate to the best of my/our knowledge. The Agent/Owner has my/our consent to investigate my/our credit report and verify employment, income, landlord and personal references and to collect a fee of \$20.00 per report, which is non-refundable. All questions must be answered in full and in the event applicant(s) withhold or give false information, this application which becomes part of the lease may be terminated by the Agent/Owner. Resident expressly authorizes Owner or Owner's agent (including a collection agency) to obtain Resident's consumer credit report and information from the internet, which Owner or Owner's agent may use if attempting to collect past due rent payments, late fees, or other charges from Resident, both during the term of the lease and thereafter. If application is approved, the applicant agrees to sign the normal lease agreement used for this property and agrees to put up the deposit before receiving keys and taking possession of the property. If applicant(s), after approval do not sign the lease, when presented to the applicant(s) any deposit paid by applicant(s) may be forfeited. The deposit must be received within 48 hours of approval of tenancy. Agent/Owner has the responsibility to offer equal service to all prospective tenants pursuant to local, state and federal fair housing laws. Properties shall be offered without respect to race, color, religion, sex handicap, familial status, national origin or elderliness. **YOU ARE HEREBY ADVISED THAT THE AGENCY/AGENT REPRESENTS THE LANDLORD/OWNER AND YOUR SIGNATURE BELOW ACKNOWLEDGES THAT THIS INFORMATION HAS BEEN DISCLOSED TO YOU.** A copy of this application will be given to you if requested or attached to your lease. Applicant understands that the agent works for the owner.

LEAD HAZARD NOTICE: Housing built before 1978 may contain lead-based paint and other lead hazards. Lead from paint, paint chips and dust can pose health hazards if not managed properly. Lead exposure is especially harmful to young children and pregnant women. There may or may not be lead based materials in the unit you may rent. You have the right to have the unit tested at your expense. **By signing below you have acknowledged that a lead hazard may be present in the unit that you rent.**

MEGAN'S LAW, State of Virginia: Prospective tenant(s) as Purchasers do should exercise whatever due diligence they deem necessary with respect to information on any sexual offenders registered under chapter 23 (19.2-387 et. Seg.) of Title 19.2, whether the owner proceeds under subdivision 1 or 2 of subsection A of 55-519. Such information may be obtained by contacting your local police department or the Department of State Police, Central Criminal Records Exchange, at 1-804-674-2000.

PLEASE READ CAREFULLY BEFORE SIGNING. IF YOU HAVE ANY QUESTIONS, YOU MAY WANT TO SEEK LEGAL ADVICE.

Applicant _____ Date _____

Applicant _____ Date _____