RENTAL APPLICATION

REQUIRED TO SUBMIT:
(Cash, MO, CC)
Application (Non-Refundable)
Fee $ ________________
Deposit to Hold $ ________________
Amt. Received $ ________________

Application is not complete until page 4 is signed. Unless this application is initialed on each page it will not be processed. (If more than two persons are applying, use additional applications.)

PROPERTY ADDRESS ____

CITY, STATE, ZIP ____

MOVE-IN DATE ____

(NON-REFUNDABLE) APPLICATION FEE $ ____________________ RENT $ ____________________ SECURITY DEPOSIT

$ ________________ PET DEPOSIT $ ________________ (NON-REFUNDABLE) PROCESSING FEE $ __________________

KEY DEPOSIT $ ________________ CLEANING FEE $ ________________ OTHER $ ____________________

EVIDENCE BY: CASH __________ CHECK __________ CASHIER'S CHECK __________ MONEY ORDER ___________

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

APPLICANT: ____

HOME PHONE # ___________________________________ OTHER PHONE ____

EMAIL ____ SSN# ____________________________

DL# ____________________________________ STATE ________ BIRTH DATE ______________________________________

CURRENT ADDRESS: ____

CITY, STATE, ZIP ____

LANDLORD NAME / MORTGAGE HOLDER: ___________________________________ PAYMENT: _________________

PHONE # ________________________ HOW LONG? _________________ (PLEASE CHECK ONE) ☐ OWNED OR ☐ RENT

REASON FOR LEAVING ____

PRIOR STREET ADDRESS: ____

CITY, STATE, ZIP ____

LANDLORD NAME / MORTGAGE HOLDER: ____

PHONE # ________________________ HOW LONG? _________________ (PLEASE CHECK ONE) ☐ OWNED OR ☐ RENT

REASON FOR LEAVING ____

CURRENT EMPLOYER: ____

HOW LONG? _____________________ EMPLOYED AS ____

ADDRESS: ____

CITY, STATE, ZIP ____

PHONE # ____ FAX# _______________________________________

This form presented by Carmen Nichols | Re/Max Win Win Real Estate,Inc | 702-789-7172 | carmen@sellmevegas.com

Instanet forms

SALARY: $ ________________ PER/MO SUPERVISOR: ________________

OTHER INCOME: SOURCE ________________ AMOUNT: $ ________________

PRIOR EMPLOYER (IF LESS THAN 3 YEARS): ________________ PHONE # ________________

HOW LONG? ________________ EMPLOYED AS ________________

SALARY: $ ________________ PER/MO SUPERVISOR: ________________

CREDIT REFERENCES: BANK ________________ ACCT.# ________________

ADDRESS ________________

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

CO-APPLICANT: ________________

SSN # ________________ DL# ________________ STATE ________ BIRTH DATE ________________

PHONE # ________________ EMAIL ________________

CURRENT ADDRESS: ________________

CITY, STATE, ZIP ________________

LANDLORD NAME / MORTGAGE HOLDER: ________________ PAYMENT: ________________

PHONE # ________________ HOW LONG? ________________ (PLEASE CHECK ONE) ☐ OWNED OR ☐ RENT

PRIOR STREET ADDRESS: ________________

CITY, STATE, ZIP ________________

LANDLORD NAME / MORTGAGE HOLDER: ________________

PHONE # ________________ HOW LONG? ________________ (PLEASE CHECK ONE) ☐ OWNED OR ☐ RENT

REASON FOR LEAVING ________________

CURRENT EMPLOYER: ________________

HOW LONG? ________________ EMPLOYED AS ________________

ADDRESS: ________________

CITY, STATE, ZIP ________________

PHONE # ________________ FAX# ________________

SALARY: $ ________________ PER/MO SUPERVISOR: ________________

OTHER INCOME: SOURCE ________________

AMOUNT: $ ________________

PRIOR EMPLOYER (IF LESS THAN 3 YEARS): ________________ PHONE # ________________

HOW LONG? ________________ EMPLOYED AS ________________

SALARY: $ ________________ PER/MO SUPERVISOR: ________________

This form presented by Carmen Nichols | Re/Max Win Win Real Estate,Inc | 702-789-7172 | carmen@sellmevegas.com

Instanet forms

CREDIT REFERENCES: BANK _____ ACCT.# _____

ADDRESS _____

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

AUTOMOBILES:

MAKE _____ MODEL _____ LIC# _____ STATE ___ YR _____ COLOR _____

MAKE _____ MODEL _____ LIC# _____ STATE ___ YR _____ COLOR _____

MAKE _____ MODEL _____ LIC# _____ STATE ___ YR _____ COLOR _____

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

IN ADDITION TO APPLICANT(S), OTHER PERSONS TO BE AT PREMISES:

NAME RELATIONSHIP AGE OCCUPATION

_____

_____

_____

_____

PETS? (Y/N) _____ HOW MANY? Cats _____ Dogs _____ Other _____

Name	Cat or Dog?	Breed	Weight	Spayed or Neutered?

If Other, please explain: _____

_____

_____

HAS ANY APPLICANT EVER FILED BANKRUPTCY? _____ GIVE DETAILS _____

_____

HAS ANY APPLICANT EVER BEEN EVICTED? _____ EXPLAIN _____

_____

HAS ANY APPLICANT EVER WILLFULLY REFUSED TO PAY RENT WHEN DUE? _____ EXPLAIN _____

_____

HAS ANY APPLICANT OR OCCUPANT EVER BEEN CONVICTED OF A GROSS MISDEMEANOR OR FELONY?

YES ☐ OR NO ☐ IF YES PLEASE EXPLAIN _____

_____

This form presented by Carmen Nichols | Re/Max Win Win Real Estate,Inc | 702-789-7172 | carmen@sellmevegas.com

Instant forms

HOW LONG DOES APPLICANT PLAN TO LIVE HERE? _____________ DOES APPLICANT PLAN TO USE LIQUID FILLED FURNITURE? _____________ TYPE ____

DOES ANYONE IN THE HOUSEHOLD SMOKE? Y/N ________

APPLICANT IN CASE OF EMERGENCY, PERSON TO NOTIFY: ___________________________________

RELATIONSHIP: ___________________________________ *PHONE #* ________________

CO-APPLICANT IN CASE OF EMERGENCY, PERSON TO NOTIFY: ___________________________________

RELATIONSHIP: ___________________________________ *PHONE #* ________________

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

DISCLOSURE

PLEASE READ CAREFULLY BEFORE SIGNING

1. APPLICANT UNDERSTANDS THAT ___________________________________ IS THE LEASING AGENT AND REPRESENTATIVE FOR THE LANDLORD OF THE PREMISES LOCATED AT ___________________________________ AT A MONTHLY RENT OF $ __________________________ .
2. APPLICANT DECLARES THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT, AND APPLICANT AUTHORIZES AN EMPLOYMENT CHECK, CRIMINAL RECORDS CHECK, CREDIT CHECK, VERIFICATION OF REFERENCES AND CURRENT AND PREVIOUS LANDLORDS.
3. APPLICANT HEREBY PAYS $ ____________________________ AS A NON-REFUNDABLE APPLICATION FEE AND $ ____________________________ AS HOLDING DEPOSIT. IF APPLICANT IS DECLINED, HOLDING DEPOSIT SHALL BE REFUNDED WITHIN ________ BUSINESS DAYS. IF, AFTER APPROVAL, APPLICANT DECIDES NOT TO FULFILL THIS AGREEMENT BY COMPLETING LEASE AND PAYING FIRST MONTHS RENT AND REMAINING SECURITY DEPOSIT, HOLDING DEPOSIT SHALL BE RETAINED BY LANDLORD TO COVER ADMINISTRATIVE EXPENSES.
4. APPLICANT AGREES TO EXECUTE A RENTAL AGREEMENT BEFORE POSSESSION IS GIVEN AND TO PAY THE RENT AND SECURITY DEPOSIT WITHIN ________________ BUSINESS DAYS AFTER BEING NOTIFIED OF ACCEPTANCE OF THIS APPLICANT.
5. LANDLORD AND AGENT WILL NOT BE BOUND BY ANY REPRESENTATIONS, AGREEMENTS OR PROMISES, WRITTEN OR ORAL, MADE BY LANDLORD OR AGENT UNLESS CONTAINED IN THE RENTAL AGREEMENT SIGNED BY LANDLORD OR LANDLORD'S AGENT.
6. APPLICANT DOES HEREBY RELEASE LANDLORD, AGENT AND THIS COMPANY FROM ANY AND ALL DAMAGES OR LIABILITIES WHICH MIGHT RESULT FROM THE ABOVE INFORMATION. APPLICANT RELEASES PRESENT LANDLORD AND ALL PREVIOUS LANDLORDS FROM ANY AND ALL LIABILITY FOR ANY DAMAGE OR INJURY WHATSOEVER CAUSED BY PROVIDING INFORMATION TO LANDLORD OR AGENT REGARDING APPLICANT.
7. APPLICANT UNDERSTANDS AND ACKNOWLEDGES THAT A FALSE STATEMENT MADE HEREIN IS GROUNDS FOR DENIAL OF RENTAL TO APPLICANT. ANY STATEMENT HEREIN MAY BE CONSTRUED AS A CONDITION PRECEDENT TO ANY BINDING RENTAL AGREEMENT OR CONTRACT BETWEEN APPLICANT AND LANDLORD.
8. APPROVAL FOR RESIDENCY IS MADE WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, OR HANDICAP.
9. APPLICANT UNDERSTANDS THAT APPLICANT ACQUIRES NO RIGHTS TO PREMISES UNTIL EXECUTION OF A RENTAL AGREEMENT IN THE FORM SUBMITTED AND DEPOSIT OF RENT AND SECURITY DESCRIBED ABOVE.

SIGNATURE OF APPLICANT ______________________________ ***DATE*** ____________ ***TIME*** ____________

SIGNATURE OF CO-APPLICANT ______________________________ ***DATE*** ____________ ***TIME*** ____________

XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

OFFICE USE ONLY:

REFERRAL COMPANY ______________________________ MLS # ____________________ DATE PAID ____________

AGENT: ______________________________ P.I.D. # ______________________________ LICENSE # ____________

THE GREATER LAS VEGAS ASSOCIATION OF REALTORS® PROVIDES THIS FORM FOR MEMBERS ONLY AND IS NO WAY DEEMED RESPONSIBLE FOR INFORMATION PROVIDED THEREIN.