



Property Address: _____

COMMERCIAL
Rental Application Process

1. **Complete ALL sections** and sign the application.
2. Application Fee: \$40 (non-refundable); must be paid in its own certified funds
3. Provide written rental references for the last 7 years with phone numbers for verification.
4. First & Last Month's Rent due at lease signing must be paid in its own certified funds
| NO CASH or PERSONAL CHECKS |
5. We will complete background, credit, and/or previous rental history checks as part of your application process.
6. For application processing, place above items 2, 3, and this application in a sealed envelope and deliver to - 925 1st ST., SW Roanoke, VA 24016. A **secured 24 hour drop box** is conveniently located to the right of our front door.



COMMERCIAL - Rental Application

925 1st Street, SW Roanoke, VA 24016 540-777-3711

STANDARD LEASE LENGTH IS 2 YEARS, OTHER TERMS MAY BE AVAILABLE UPON REQUEST

Application Fee: \$40 (non-refundable)

PLEASE PRINT AND FILL OUT COMPLETELY

Today's Date: ____/____/____

Property for which applicant is applying: _____

Leasing agent showing you the property: _____

BUSINESS NAME: _____

TAX ID #: _____

Phone Number: _____ **Email:** _____

Current Address:

APPLICANT:

Phone Number: _____ **Email:** _____

Current Address:

First: _____ **Middle:** _____ **Last:** _____

CO-APPLICANT:

Phone Number: _____ **Email:** _____

Current Address:

First: _____ **Middle:** _____ **Last:** _____

Is either applicant, or any anticipated occupant a member of the armed services, reserves or National Guard? Yes / No

If yes, list the name of the person and branch or service with which the person is a member:

OTHER PRIOR ADDRESSES:

(Beginning with current or most recent and for the last 7 years, use back of page if necessary)

Address: _____

Landlord: _____ Phone: _____

Rent:\$ _____ How long: _____ Reason for leaving: _____

Address: _____

Landlord: _____ Phone: _____

Rent:\$ _____ How long: _____ Reason for leaving: _____

BANKING/CREDIT UNION ACCTS/AVAILABLE CREDIT/OTHER:

Bank Name: _____ City/State _____

CURRENT MONTHLY PAYMENTS:

	<u>COMPANY</u>	<u>MONTHLY PMT:</u>	<u>BALANCE:</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

VEHICLES IN POSSESSION OF APPLICANT/CO-APPLICANT:

1) Make/Model/Year _____ License #/state: _____

2) Make/Model/Year _____ License #/state: _____

PERSONAL REFERENCES:

1)

Name Address Phone
Relationship to you: _____

2)

Name Address Phone
Relationship to you: _____

Has applicant or co-applicant ever:

Applicant

Co-Applicant

Been evicted or asked to move out?	Yes No	Yes No
Broken a rental agreement or lease contract?	Yes No	Yes No
Been late with rent payments or sued for non-payment of rents?	Yes No	Yes No
Been sued for damages to a rental property?	Yes No	Yes No
Declared Bankruptcy?	Yes No	Yes No
Had any judgments against you?	Yes No	Yes No
Been convicted of a misdemeanor or a felony, Ex: assault, traffic convictions, offenses related to your pet, or any offense involving the use or abuse of drugs, including alcohol?	Yes No	Yes No

If YES to ANY of the above questions, explain below. For convictions, give the details including offense charged, offense convicted of, jurisdiction/court in which conviction occurred, date of conviction, and the circumstances upon which conviction was based. (use back of page, if needed)

CONTACT IN CASE OF EMERGENCY:

1)

Name	Address	Phone
Relationship to you: _____		

2)

Name	Address	Phone
Relationship to you: _____		

BY MY SIGNATURE BELOW, I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE, CORRECT AND COMPLETE. I HEREBY AUTHORIZE LANDLORD OR HIS/HER AGENT TO MAKE, NOW AND DURING ANY TENANCY THAT MAY ENSUE, ANY INQUIRIES/CONTACTS NECESSARY TO EVALUATE/VERIFY THE INFORMATION I HAVE PROVIDED HEREIN, TO INCLUDE INQUIRING WITH THE APPROPRIATE CREDIT CHECKING AUTHORITIES AND/OR JUDICIAL JURISDICTIONS, AND CONTACTING THE REFERENCES WHICH I HAVE LISTED HEREIN. IF I RENT THE IDENTIFIED PREMISES, I UNDERSTAND THAT THE INFORMATION CONTAINED ON THIS FORM AND ON ANY RENTAL AGREEMENT MAY BE MAINTAINED BY LANDLORD FOR UP TO SIX YEARS AFTER I VACATE THE PREMISES, OR AS NEEDED BY LANDLORD TO RECOVER ANY LOSSES ARISING OUT OF SUCH TENANCY. I UNDERSTAND THAT THE LANDLORD MAY AT ANY TIME TERMINATE MY RENTAL AGREEMENT FOR ANY MISREPRESENTATIONS MADE HEREIN.

Applicant's signature	Date
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Co-Applicant's signature	Date
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You may return this application and supporting documentation in the mail to us at:
SECURE DROP BOX at:
Hometown Holdings, LLC
925 1st ST.,SW Roanoke, VA 24016





Hometown Holdings, LLC

925 1st ST., SW Roanoke, VA 24016

Phone: (540) 266-3172 Fax: (540) 266-3114

Rental Reference Request

Completed by TENANT:

Name: _____

SSN: _____ -- _____ -- _____

Address: _____

Release: *I authorize the complete release of all information about my tenancy at ANY rental unit.*

Signature: _____ Date: ____/____/____

Completed by LANDLORD:

When did the Tenant rent from you? _____

How long did they live in the rental unit? _____

Monthly rent amount? _____

Utilities included? **YES / NO** If YES, please list _____

Rent was paid on time? **YES / NO** If NO, how many times late? _____

Did/will Tenant fulfill obligations of lease? _____

Are you owed any money by Tenant? **YES / NO** If YES, what \$ amount? _____

Did Tenant damage the rental unit or common areas of the property? **YES / NO**

If YES, please indicate: _____

Tenant was sent how many notices of rental or lease violations? _____

Were/Are there any court action involving Tenant? **YES / NO**

Are you related to Tenant by blood or marriage? **YES / NO**

Additional Notes: _____

Signature by person completing this form: _____

DATE: ____/____/____

rev. 2017/10