



Rental Application Process

Apply and Pay Online: <https://hthproperties.com/apply-online/>

1. **Complete ALL sections** and sign the application.
2. Provide proof of income for **each applicant**. Single or Combined income should be 3 times the amount of the property monthly rent. Proof of income can include:
 - Two recent pay stubs
 - A letter from employer with contact information
 - Copies of court ordered income
 - Disability and/or retirement income statements
 - Bank statements
3. Provide written rental references for the last 7 years with phone numbers for verification.
4. Application Fee: \$40 (non-refundable); must be paid in its own certified funds
5. First & Last Month's Rent due at lease signing must be paid in its own certified funds
| NO CASH or PERSONAL CHECKS |
6. We will complete background, credit, and/or previous rental history checks as part of your application process.
7. For application processing, place above items 2, 3, 4, and this application in a sealed envelope with the **1) PROPERTY ADDRESS, 2) your FULL NAME, and 3) Leasing Agent who showed the property** on the front 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.



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: \$40.00 (non-refundable)

PLEASE PRINT AND FILL OUT COMPLETELY

Today's Date: ____/____/____

Property for which applicant is applying: _____

Leasing agent showing you the property: _____

APPLICANT:

Phone Number: _____ **Email:** _____

Current Home Address:

First: _____ Middle: _____ Last: _____

SSN: _____ Driver's License #: _____ Issuing State: _____

DOB: _____ Number of Dependents: _____

CO-APPLICANT:

Phone Number: _____ **Email:** _____

Current Home Address:

First: _____ Middle: _____ Last: _____

Relationship to Applicant: _____

SSN: _____ Driver's License #: _____ Issuing State: _____

DOB: _____ Number of Dependents: _____

Other Occupants and Relationship to Applicant/Co-Applicant: (include ages of minor children)

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: _____

APPLICANT'S EMPLOYMENT HISTORY:

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

CURRENT EMPLOYER ADDRESS: _____

Current Employer Name Immediate Supervisor Dates Employed

Employer Phone Number Monthly Take-Home Pay Hourly Rate

PREVIOUS EMPLOYER ADDRESS: _____

Previous Employer Name Immediate Supervisor Dates Employed

Employer Phone Number Monthly take-home Pay Hourly Rate

CO-APPLICANT'S EMPLOYMENT HISTORY:

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

CURRENT EMPLOYER ADDRESS: _____

Current Employer Name Immediate Supervisor Dates Employed

Employer Phone Number Monthly take-home Pay Hourly Rate

PREVIOUS EMPLOYER ADDRESS: _____

Previous Employer Name

immediate supervisor

Dates Employed

employer phone number

monthly take-home Pay

Hourly Rate

Additional regular and current sources of income: SSI, Disability, child support, investments, etc.:

Amount: \$ _____

Amount: \$ _____

Amount: \$ _____

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: _____

OWN ANY PETS? YES NO

\$150 NONREFUNDABLE Pet Fee(max. 2 pets) plus \$25 per pet per month.

If yes, indicate type, breed, weight, and whether kept inside:

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: _____

NEXT OF KIN/NEAREST RELATIVE NOT LIVING WITH YOU:

1) _____
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

Co-Applicant's signature Date

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**

AdditionalNotes: _____

Signature by person completing this form: _____

DATE: ____/____/____

rev. 2017/10