



## **COMMERCIAL ~ Rental Application Instructions**

1. **Complete ALL sections** and sign the application.
2. **Application Fee: \$45** (non-refundable); cash | certified funds; preferred
3. **Provide written rental references** for the last 7 years with phone numbers for verification.
4. **First Month's Rent and Security Deposit due at lease signing ~ EACH must be paid in its own separate certified funds | NO CASH or PERSONAL CHECKS |**
5. **Background Check:** We will complete a criminal background, a credit, and/or previous rental history checks as part of your application process.
6. For application processing, place above items 2 and 3 and this application in a sealed envelope with the **1) PROPERTY ADDRESS, 2) your FULL NAME, and 3) Marketing Personnel 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.





**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: **\$45** in cash or certified funds; preferred | (non-refundable)

**PLEASE PRINT and FILL OUT COMPLETELY**

Today's Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Desired Move In Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Property Address applying for: \_\_\_\_\_

Marketing Personnel showing you the property: \_\_\_\_\_

**BUSINESS NAME:** \_\_\_\_\_

**BUSINESS PURPOSE:** \_\_\_\_\_

**(example: Tree Service, Construction, HairDresser/Salon)**

**TAX ID #:** \_\_\_\_\_

**Business Phone Number:** \_\_\_\_\_

**Business Email:** \_\_\_\_\_

**Current Address:**

**APPLICANT:**

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Current Address:**

**CO-APPLICANT:**

First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Current Address:**

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>
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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)

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Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_  
Relationship to you: \_\_\_\_\_

2)

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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)**

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**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 MARKETING PERSONNEL 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 1<sup>st</sup> ST., SW Roanoke, VA 24016

Phone: (540) 777-3711 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 actions involving Tenant? **YES / NO**

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

AdditionalNotes: \_\_\_\_\_

Signature by person completing this form:

DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_