



## RESIDENTIAL RENTAL APPLICATION

Applicant Information			
Name	Phone Number		
Address: _____			
Street	City	State	Zip
Present Landlord	Phone Number		
Prior Landlord	Phone Number		
Social Security Number	Spouse's Social Security Number		
Drivers License (License # and State)			
Date of Birth	Email Address		

Employer and Income Information		
Employer	Position	Length of employment
Contact	Phone Number	
Salary	Amount and source of additional income	

Banking Information	
Bank Name Holding Checking Account	Account Number (Last four digits)
Bank Name Holding Savings Account	Account Number (Last four digits)

Personal/Credit References		
Name	Relationship	Phone Number
Address: _____		
Street	City	State      Zip
Name	Relationship	Phone Number
Address: _____		
Street	City	State      Zip

I represent that the information provided in this application is true to the best of my knowledge. You are hereby authorized to verify my credit and employment references in connection with the processing of this application. I acknowledge receipt of a copy of this application.

I agree that the required Application Fee of \$ \_\_\_\_\_ received by management on \_\_\_\_\_ will not be refunded for any reason. I further agree that my Holding Fee/Application Deposit received by management (\$ \_\_\_\_\_ given on \_\_\_\_\_) will be applied toward the Security Deposit, which must be paid in full before occupancy and may not be applied as rent; the first month's rent must also be paid before occupying an apartment. If I decide not to move in after this RENTAL APPLICATION has been accepted, I agree that the Holding Fee/Application Deposit will not be refunded. If I feel that my RENTAL APPLICATION has been unfairly denied, I understand that I have the right to call the Property Manager at (804) 358-1091 to request additional consideration. I understand that this is an application only, and I acquire no rights in any apartment until: 1) the application is approved, 2) I pay the required deposit, and 3) I sign a Lease Agreement. At that time, this application becomes part of the lease.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Clachan Properties, LLC | 1320 West Broad Street, Suite A | Richmond, Virginia 23220

804-358-1091 *phone* | 877-804-RENT (7368) *toll free* | 804-358-8680 *fax* | [leasing@clachanproperties.com](mailto:leasing@clachanproperties.com)