

THE MILL at Blacksburg
1811 Grayland Street, Apt. 3
Blacksburg, VA 24060
Phone & Fax: 540-552-4272

Rental Application

(\$10 App. Fee per applicant)

FULL NAME OF ALL APPLICANTS	BIRTH DATE	SOCIAL SECURITY NUMBER
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

Rental History

PRESENT ADDRESS: _____ PHONE #: _____
CITY: _____ STATE: _____ ZIP: _____
LANDLORD: _____ PHONE #: _____
LENGTH OF TIME AT THIS ADDRESS: _____ FROM: _____ TO: _____
MONTHLY RENT: _____ UTILITIES INCLUDED? YES _____ NO _____ NOTICE GIVEN? _____
REASON FOR MOVING: _____
PREVIOUS ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
LANDLORD: _____ PHONE #: _____
LENGTH OF TIME AT THIS ADDRESS: _____ FROM: _____ TO: _____
MONTHLY RENT: _____ UTILITIES INCLUDED? YES _____ NO _____ NOTICE GIVEN? _____
REASON FOR MOVING: _____

School Information

SCHOOL NAME: _____ YEAR: _____ GRADUATION DATE: _____
SCHOOL ADVISOR: _____ PHONE #: _____ MAJOR: _____

Employment Information
Applicant must attach last 2 paystubs

EMPLOYER: _____
OCCUPATION: _____ TITLE: _____
SUPERVISOR'S NAME: _____ PHONE #: _____
BEST TIME TO CALL: _____ YOUR WORK PHONE NUMBER: _____
AT JOB SINCE: _____ SALARY: \$ _____ PER: _____
PREVIOUS EMPLOYER IF < 1 YEAR: _____ PHONE #: _____

Please Complete the Reverse Side

Credit/Banking Information
Monthly Obligations

CAR PAYMENT: \$ _____ INSURANCE: \$ _____ CREDIT CARDS: \$ _____

MEDICAL BILLS: \$ _____ STUDENT LOANS: \$ _____ ALIMONY/CHILD SUPPORT: \$ _____

BANK NAME & ADDRESS: _____

ACCT. NUMBER: _____ CHECKING: _____ SAVINGS: _____ OTHER: _____

References

PARENTS NAME: _____ PHONE #: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

Personal References

NAME: _____ PHONE #: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

NAME: _____ PHONE #: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

Additional Information

VEHICLES:

MAKE & MODEL: _____ YEAR: _____

COLOR: _____ TAG #: _____ STATE: _____

IN CASE OF EMERGENCY NOTIFY:

NAME: _____ PHONE #: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

Legal Questions

HAVE YOU EVER HAD JUDGMENTS AGAINST YOU? YES: _____ NO: _____

IF YES, PLEASE EXPLAIN: _____

HAVE YOU EVER BEEN SUED? YES: _____ NO: _____

IF YES, PLEASE EXPLAIN: _____

HAVE YOU EVER HAD COLLECTION PROCEEDINGS AGAINST YOU? YES: _____ NO: _____

IF YES, PLEASE EXPLAIN: _____

By signing this application, it becomes part of applicants' lease, if approved. Applicants understand that the giving of false information may, at Landlord's option, constitute a breach, thereby voiding any subsequent lease. Applicants authorize Landlord to verify all references, including credit bureaus, FirstAmerican SafeRent or any other database organization for purposes of securing a credit report, housing history report, or any other background checks, including criminal.

SIGNED _____ DATE _____

SIGNED _____ DATE _____

SIGNED _____ DATE _____