

BONDURANT REALTY CORPORATION

REALTORS • BUILDERS • DEVELOPERS • PROPERTY MANAGERS

1300 E MAIN STREET RADFORD, VIRGINIA 24141-4749

Telephone (540) 639-9672 (Fax) (540) 633-0972

www.bondurantrentals.com info@bondurantrentals.com

APARTMENT COMPLEX _____ DATE OF OCCUPANCY DESIRED _____

PRIMARY APPLICANT

LAST NAME (INDICATE JR., SR., ETC.) _____ FIRST NAME _____ MIDDLE NAME _____

AGE _____ DATE OF BIRTH _____ SOCIAL SECURITY # _____

CURRENT ADDRESS (NOT PO BOX) _____ CITY _____ STATE _____ ZIP _____

HOW LONG AT CURRENT ADDRESS _____ CURRENT PHONE NUMBER _____ EMAIL _____

OWN _____ RENT _____ NAME OF LANDLORD _____ LANDLORD PHONE NUMBER _____

IF AT ABOVE ADDRESS LESS THAN FIVE YEARS, LIST OTHER MOST RECENT ADDRESSES BELOW:

ADDRESS	CITY	STATE	ZIP	HOW LONG	OWN/RENT	FROM WHOM
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_____	_____	_____	_____	_____	_____	_____
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HAVE YOU RENTED FROM BONDURANT IN THE PAST? _____ IF YES, AT WHAT ADDRESS? _____ WHEN? _____

MARITAL STATUS: MARRIED _____ SINGLE _____ DIVORCED _____ SEPARATED _____ WIDOWED _____

NEAREST RELATIVE NOT LIVING WITH YOU _____

ADDRESS, CITY, STATE, ZIP _____ PHONE _____

ARE YOU OR ANYONE THAT WILL BE LIVING WITH YOU A SMOKER? _____ HOW MANY PEOPLE WILL BE OCCUPYING THE RESIDENCE? _____ WILL A PET BE LIVING WITH YOU? BREED/WEIGHT _____

EMPLOYER _____ EMPLOYER'S ADDRESS _____

PHONE NUMBER _____

POSITION/TITLE _____ HOW LONG? _____ SALARY (MO/WK/HR) _____

IF HOURLY, PLEASE INDICATE # OF HOURS WORKED/WEEK _____

IF SELF-EMPLOYED, INDICATE TYPE OF BUSINESS _____ HOW LONG IN BUSINESS _____

LICENSED? _____ TYPE _____ WHERE AND WITH WHOM? _____

IN CASE OF EMERGENCY, NOTIFY _____

ADDRESS _____

PHONE NUMBER _____

DRIVER'S LICENSE # _____

MAKE OF CAR _____ MODEL _____ YEAR _____ COLOR _____

TAG # _____ STATE _____ REGISTERED TO _____

LIST THREE UNRELATED REFERENCES:

NAME	YRS	EMPLOYER	CITY	STATE	ZIP	PHONE
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

LIST ALL CURRENT DEBTS:

NAME	ADDRESS	BALANCE	MONTHLY PAYMENT
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

ANY CHANGES MADE BY THE TENANT AND/OR CO-TENANT/SPOUSE MUST BE REPORTED TO THE PROPERTY MANAGER WITHIN 5 DAYS (i.e., CHANGES IN TENANCY, EMPLOYMENT, PHONE, CAR, MARITAL STATUS, ETC.)

I hereby state and represent that the information in this application is complete and accurate. I authorize you to check my credit report and verify any and all information contained in this application including and not limited to checking credit history and inquiring into my character, general reputation, personal characteristics and mode of living, and I release all concerned from any liability in connection with any information they give. I acknowledge and agree that in the event I enter into a lease with the Owner that lease may be canceled by the Owner in the event any of the information provided by me in this application is materially inaccurate or incomplete. I understand that the Rules and Regulations are adopted for the benefit of all Residents and proper operation of the property, and I agree that the residency will be subject to them.

SIGNATURE: _____

DATE: _____

SEE OPPOSITE SIDE FOR CO-APPLICANT/PARENT or SPOUSE INFORMATION

REVISED 10/17/13

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