

LEASE APPLICATION



It is illegal, pursuant to the Ohio Fair Housing Law, Division (H) of Section 4112.02 of the Revised Code and the Federal Fair Housing law, 42 U.S.C.A. 3601, as amended, to refuse to sell, transfer, assign, rent, lease, sublease or finance housing accommodations, refuse to negotiate for the sale or rental of housing accommodations, or otherwise deny or make unavailable housing accommodations because of race, color, religion, sex, familial status as defined in section 4112.01 of the Revised Code, ancestry, military status as defined in that section, disability as defined in that section, or national origin or to so discriminate in advertising the sale or rental of housing, in the financing of housing, or in the provision of real estate brokerage services.

APPLICATION for occupancy of 2351 Queensway Application submitted to: Agent, Property Manager or its owner(s). Deliver or mail to: Application will be processed upon receipt of paperwork and payment (cash) Listing agent, Peggy Rahe. Phone (937) 361-9599 email: Homes@RaheTeam.com.. Non-refundable fee must be paid before this form is processed of \$100 per person over the age of 18 who will occupy this residence. Each resident signs their own lease application. Only exception over 18 is a student in schoo under 22 years of age . PROOF required .

APPLICATION STATUS CONTACT		age i i i coquii cu i
All Eloanon of Allos Gontage	IN ORMATION.	
Where do you prefer, we contact you to co	ommunicate status concerning y	our application?
Cell number: home	number:	office number:
Email:		_
2 ND occupant:	their cell n	umber:
How many years do you wish to lease this ho	ouse? Are you military	civilian WPAFB contractor
Are you a US citizen? Green Card? _	Other authorized documen	tation:
If you are not a US Citizen your employer mu	st vouch for the lease provide Emp	ployer contact: and more documentation.
Name	phone	company
If Military your Commanding Officer Name: _		
Commander's phone: By submitting this application, I authorize the		

By submitting this application, I authorize the investigation of related facts and the exchange of reports regarding this application with credit reporting agencies and others. If requested, I will be told the name and address of agencies being used.

INSTRUCTIONS: A response is required for each blank. Use N/A if not applicable. All residents 18 years of age, or older, must complete a separate application. Please print except for signature. Use full names and initials. If currently living with relatives then use their address as present address. Any statements or information that is false will immediately terminate lease or application. You will automatically lose any application fees, deposits or rents paid. FILL OUT ENTIRE APPLICATION TO BE CONSIDERED.

Please submit:

- Pay stubs from last 3 months
- · Proof of any child support, SSI, SSD, or other forms of income
- Copy of current driver license
- Good phone numbers for past 3 landlords
- Good phone number for current employer(s)
- If self employed 2 years tax returns (page that shows income)

APPLICANT GENERAL INFORMATION:

First Name:	Middle Name	Last Name:	
Birth date: SS	#		
List all your former names,nickname,	married,birth name in full, includin	ng Initials used and dates used	d:
Your Email:		Your email informat	tion is NOT shared)
Your Phone Numbers: Mobil:	Work:	Home	9:
DRIVERS LICENSES: State issu	edLicen	se Number	Exp:
Please present your driver's lic	enses so we can take a cell	phone scan with your ap	plication.
TOTAL ANNUAL INCOME Last y	rear: \$		
CURRENT JOB INCOME \$	(Weekly /	Monthly / Annual)	
INCOME - OTHER THAN WORK	(Week	dy / Monthly / Annual) - SOU	JRCES:
Do you plan to buy a home? Check applicable boxes. For an Have you ever been sued for bills Have you had a lawsuit against y Have you ever filed for bankrupto Are you planning on filing for ban Have you ever been charged with Have you ever changed your nan Did you do a debt consolidation le Have you ever willfully refused to Have you ever been convicted fo Have you ever been served an ever the have you ever the have you ever the have you ever th	ny "Yes" answer, specify the or "?	date and provide additional Yes, Date: Yes, Date: Yes, Date: Yes, Date: Yes, Date: Yes, Date: No No No	
Name of your attorney		Attorney's Phone	number:
MARITAL INFORMATION:			
MARITAL STATUS Single / Married (da	te)/ \square Divorce	ed (date)/ □	Separated (date)
Current Spouse's Name (first middle & maid	en name if wife)		
Former Spouse's Name (first middle last)			
Former Spouse's current Phone	c	urrent email:	
Former Spouses' complete address:		Ci	ty
State	Zip Code:	County:	:

RENTAL HISTORY:

If currently living with relatives, then use their address as present address. _____ CITY: _____ STATE: ___ ZIP: ____ YOUR PRESENT ADDRESS: ___ Current Monthly Rent: \$ | Is present rent up to date? | Yes | No Number of bedrooms rented _____ Reason for leaving current rental: _____ Have you given notice? ☐ Yes ☐ No Have you been asked to leave? ☐ Yes ☐ No CURRENT LANDLORD: NAME: _____ ADDR: LANDLORD CITY: ______ STATE: ZIP: ____ LANDLORD'S PHONE NO: ____ Do you pay the following where you currently live - check No or Yes for each: Electric: □ No □ Yes Water: □ No □ Yes Gas: ☐ No ☐ Yes Lawn cutting: ☐ No ☐ Yes Landscape: ☐ No ☐ Yes Trash: □ No □ Yes Name and address utilities are in (gas / electric / water): _____City ______State ___ Zip ______ Address: ___ _____CITY: ______ STATE: ____ZIP: _____ PAST ADDRESS: ___ ADDR: _____ CITY: _____ STATE: ____ ZIP: ____ ____ From: _____ To: ____ LANDLORD'S PHONE NUMBER: __ Why did you leave this address? ___ CITY: STATE: ZIP: PAST ADDRESS: _____CITY: _____STATE: ZIP: ____ _____ ADDR: ____ _____ From: _____ To: _____ LANDLORD'S PHONE NUMBER: ___ Why did you leave this address? OCCUPANTS how many people will occupy this property part time or full time? _____ Names & Birthdates of all people who will be residing in this property: (write PT part time next to name if not full time) 1. BIRTHDATE _____ 2. BIRTHDATE _____ 3. BIRTHDATE BIRTHDATE _____ 4. BIRTHDATE 5. BIRTHDATE ____ Does any occupant smoke? ☐ No ☐ Yes NOTE: this is classified as a NON-SMOKING PROPERTY of any kind

AUTOMOBILES: State _____License Plate #1 ____ #1 Model/Color _ Lien Holder _ ____ City & State ___ ___State _____ License Plate #2 ___ #2 Model/Color Lien Holder__ __ City & State ___ **EMPLOYMENT:** Your current employer: ____ Address: City State and Zip: ___ ____ Supervisor's Phone number ___ Supervisor's Name __ How long have you been with this employer? What is your continued employment probability with this employer? ___ Previous employer: _ _____ Address: City State and Zip _____ Supervisor's Phone number ____ Supervisor's Name: ___ Previous employer: ______ Address: City State and Zip Supervisor's Name: _____ Supervisor's Phone number _____ **APPLICANT'S REFERENCES:** A sibling in OHIO? _____ Relation ___ Home Phone ___ Work Phone: ___ Address Other Relative Name ______ Relation ____ Work Phone: Home Phone Address _

Relation:

Relation

___ email address: _

Friend in OHIO: ____

Other Non-Relative Name _

Phone: _

Address:

Phone:	email address:	
Address:		
Your Mother's Maiden Name:	Spouse's Mother's Maiden Name)
Who to notify for emergency: Name	Phone:	Relation
Your Doctors name:		_Phone
the investigation and that this	pplication fee of \$75.00 per occ fee is NOT refundable. Applica	cupant 18 or over is collected to pay for ation form is not considered submitted until add tenant, criminal, credit or any other
vacates property and all reimmediately upon lease applic	ntal agreement conditions ha cation acceptance, property ma	osit. Security deposit is held until tenant ave been met. If you do not respond anager, owner or its agent will assume you be free to lease to next applicant(s).

PETS:

Do you have pets □ No □ Yes NOTE: PETS are not permitted to visit or live at this property

rents and expense to re-rent said property.

If you are found to harbor pets or pet sitting without formal pre-approval in writing, you are considered to have a pet on the property without permission which is grounds for immediate eviction and loss of Security Deposit. No vicious breeds or mix of vicious dogs are ever allowed on this property

Once you have been approved and paid your security deposit, first month's rent must be paid before move in can start. If you decide not to take the property for any reason once lease agreement is signed, there are no refunds for the any fees. You may also be subject to damages such as loss of

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To Whom It May Concern

UNDERSIGNED APPLICANTS AUTHORIZE ANY PERSON OR FIRM TO RELEASE INFORMATION CONCERNING THEIR CREDIT AND PAYMENT HISTORY UPON PRESENTATION OF THIS FORM OR A PHOTO COPY OF THIS FORM, AT ANY TIME.

I hereby authorize Dayton Rental Homes – Rahe Team or their agents, owners or representatives to obtain information concerning my past, current and future credit, rental and employment history, and to answer any questions in the future. I hereby authorize any of the following sources, including but not limited to (1) credit reporting agencies (2) public or privately owned utility companies (3) government housing (4) current and past landlords, employers or creditors to release any said information to the above named party.

I hereby authorize release of any of the above sources, their officers, agents or employees from any liability for damages of any kind whatsoever, either caused by negligence or not, which may at any time result in a decision not to rent this property now or in the future by reason of compliance with the above-mentioned inquiry, which may include the answering of specific questions and the giving of information concerning my (applicant and co-applicants) present or past record.

Additionally, I give the above party and their agent/owner/lender permission to copy and submit this form as needed for the purpose of processing my rental application, lease, lease option or rent to own and to continue to get information for credit collections when occupying property in the future.

Applicant	Date signed
Applicant's date of birth	Applicants social security
Print Your Full Name Here and all names you have used in the past, married nicknames,alias	etc:

www.DaytonRentalHomes.com



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Authorization for Release of Information

<u>Purpose</u>: Dayton Rental Homes – Rahe Team will use this authorization and the information obtained with it to administer and enforce rules and policies related to the rental property owned and/or managed by the above-named organization.

<u>Authorization:</u> I authorize the above-named organization and its manager/employees or owner to obtain information about me or my family that is pertinent to the rental of property, periodic reviews during the term of the lease, and subsequent to the term, if collection efforts are required for any monies owed pertaining to the rent of this property.

Information collected and covered-inquiries may include but are not limited to:

Handicapped assistance expenses
Medical expenses
Child care expenses
Criminal activity
Credit history
Social security numbers
Residences and rental history
Identity and marital status
Family composition
Employment/income/pensions/assets
Federal/state/tribal/local benefits

<u>Computer Matching Notice & Consent</u>: I agree that the above-named organization may conduct computer matching programs with other governmental agencies including Federal, State, Tribal or any local agencies.

Government agencies include but are not limited to: Police departments, FBI, US Post office personnel management, US Social Security Agencies, State Welfare and Food Stamp agencies and Department of Defense. The match will be used to verify information supplied by the family.

Conditions: I agree that photocopies of this authorization may be used for the purposes as stated above. If I do not sign this authorization, I understand I may be denied occupancy of rental property owned and/or managed by Dayton Rental Homes – Rahe Team or their authorized agents.

Applicant	(Date signed
	EQUAL HOUSING OPPORTUNITY	