

# West Virginia Rental Application

PROPERTY APPLYING FOR:



## Personal Information

Full Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Social Security # \_\_\_\_\_

Driver's License # / State \_\_\_\_\_ Phone # \_\_\_\_\_ Email \_\_\_\_\_

## Roommates / Other Occupants

| Full Name - First, Middle, Last | Birth Date | Relationship to You |
|---------------------------------|------------|---------------------|
|                                 |            |                     |
|                                 |            |                     |
|                                 |            |                     |
|                                 |            |                     |

## Rental History

Please list your three most recent addresses or from past five years.

|                           | Current Address | Previous Address | Previous Address |
|---------------------------|-----------------|------------------|------------------|
| Street Address / Unit No. |                 |                  |                  |
| City, State, Zip          |                 |                  |                  |
| How long at this address  |                 |                  |                  |
| Manager/Owner Name        |                 |                  |                  |
| Manager/Owner Phone       |                 |                  |                  |

## Income

Please list employment from past five years & other sources of income.

## Employment History

|                                | Current Employer | Previous Employer | Previous Employer |
|--------------------------------|------------------|-------------------|-------------------|
| Employed by                    |                  |                   |                   |
| Position                       |                  |                   |                   |
| Dates of Employment (From..To) |                  |                   |                   |
| Monthly Income                 |                  |                   |                   |
| Name of Supervisor             |                  |                   |                   |
| Supervisor's Phone #           |                  |                   |                   |

|                                    |  |  |  |
|------------------------------------|--|--|--|
| Address - Street, City, State, Zip |  |  |  |
|------------------------------------|--|--|--|

### Other Income Sources

| Type | Monthly Income | Name of Provider | Address - Street, City, State, Zip | Phone # |
|------|----------------|------------------|------------------------------------|---------|
|      |                |                  |                                    |         |
|      |                |                  |                                    |         |

### Emergency Contact Information

Name \_\_\_\_\_ Phone # \_\_\_\_\_ Relationship \_\_\_\_\_

Address - Street, City, State, Zip \_\_\_\_\_

### Vehicles

| Make & Model | Year | Color | Plate # | State |
|--------------|------|-------|---------|-------|
|              |      |       |         |       |
|              |      |       |         |       |
|              |      |       |         |       |

### Other Information

Have you ever been evicted?  Yes  No

If yes, when & why \_\_\_\_\_

Have you ever been convicted of a felony?  Yes  No

If yes, when & why \_\_\_\_\_

Have you ever filed for bankruptcy?  Yes  No

If yes, when & why \_\_\_\_\_

Do you currently smoke?  Yes  No

Do you have any pets?  Yes  No

If Yes, please list each Type, Breed & Approx. Weight \_\_\_\_\_

How did you learn about us? \_\_\_\_\_

### Agreement & Consent to Background Check

*I believe that the statements I have made are true and correct. I hereby authorize the verification of information I provided, communication with any and all names listed on this application and for the issuer of this form to conduct a background check to obtain additional information on credit history, criminal history and all Unlawful Detainers. I understand that any discrepancy or lack of information may result in the rejection of this application. I understand that this is an application for a home or apartment and does not constitute a rental or lease agreement in whole or in part. I further understand that there is a non-refundable fee to cover the cost of processing my application and I am not entitled to a refund.*

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

**CO-SIGNER**

*By signing this form, Co-signer authorizes the landlord to perform a credit check or background check, if necessary. Co-signer forms are accepted at the landlord's discretion, and a co-signer form does not in any way guarantee an applicant a rental unit. Failure to fully complete a requested co-signer form may result in the landlord refusing a rental application.*

**Personal Information**

Full Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Social Security # \_\_\_\_\_  
Driver's License # / State \_\_\_\_\_ Phone # \_\_\_\_\_ Email \_\_\_\_\_  
Current Employer Name / Phone # \_\_\_\_\_

**Co-signing for**

Full Name \_\_\_\_\_ Unit Applied for \_\_\_\_\_

*It is hereby agreed that the aforementioned Co-signer will assume any and all responsibilities and/or obligations of the Leaseholder's share of expenses if the Leaseholder cannot or will not oblige. This Co-signer Agreement will remain in force throughout the entire term of the Leaseholder's tenancy, even if the tenancy is extended and/or changed in its terms.*

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