

### 4 SEASONS VACATION RENTALS & SALES Office: 336-246-2700 • Fax: 336-246-2701 PO Box 211 • 370 S Main St Jefferson, NC 28640 Rentals@4SeasonsVacations.com www.4SeasonsVacations.com

Thank for your interest in renting a property managed by 4 Seasons Vacation Rentals & Sales. Your application will be reviewed in a timely manner and if the application is approved, you will be asked to sign the lease, pay rents and security deposit for the premises.

In order to apply for occupancy for a property managed by 4 Seasons Vacation Rentals & Sales, please fill out this application in full and return to 4 Seasons (in person, email or fax). **Everyone that plans to live in the home, age 18 or older, is required to submit a completed signed application.** 

- Non-Refundable Application Fee cash, money order and certified check \$45 for one applicant, \$25 for each additional applicant
- Perform at tenants cost a credit/background check through email link provided by 4 Seasons.
- If applicable, Pet Fee must be paid before tenant may take possession of the home. PET RESTRICTIONS IN ALL CASES: Pitbulls, Rottweilers, Chows, Dobermans, any strains thereof or family breed are not allowed due to owner's insurance liability.
- Picture I.D., i.e. DMV, Green card, Visa or Passport may be accepted.
- Proof of income pay stubs, 3 months bank statements and/or official letter from your employer, government or military or latest Leave and Earnings Statement (LES) is needed. For independent contractors, the last two (2) years tax returns are required.
- Please sign & submit the "Release of Rental History" form with your application.
- If your application is approved, your initial payments of rent, pet fee and security deposit must be paid with cash, money order or cashiers check. Future rents may be personal check.

Thank you for your interest in our properties. We strive for excellent customer service. We hope we'll be doing business with you soon!

4 Seasons Vacation Rentals & Sales Long-Term Rental Department 336.246.2700 336.246.2701 FAX <u>Rentals@4SeasonsVacations.com</u> <u>www.4SeasonsVacations.com</u>

# Authorization Of Information Release

Applicant will submit an application fee in the amount of \$45 (1 Adult) plus \$25 for each additional applicant for the purpose of being considered as a tenant. The application fee is non-refundable, whether or not the applicant becomes a tenant in the premises.

Each applicant understands that the agent represents the Owner of the premises.

Each applicant certifies information provided in this application is true and accurate to the best of their knowledge. If any applicant withholds or gives false information, this application is considered void and the owner may terminate the lease agreement.

The Owner of the premises you are applying for carries insurance on the dwelling only. You must acquire renters insurance for your own household goods. Neither the agent nor owner of the property is responsible for damages to your personal property.

If application(s) is approved, Agent must receive rents and security deposit in certified funds or cash within 24 hours after application approval. Property remains on the market until these monies are received along with the signed lease.

Owner and Agent are pledged by the letter and spirit of the U.S. policy for achievement of equal housing opportunity. We encourage and support affirmative advertising and marketing programs in which there are not barriers to obtaining housing because of race, color, religion, sex, handicap, familial status, elderliness, national origin, sexual orientation, or gender.

#### Megan's Law Disclosure:

Applicant(s) should exercise whatever due diligence they deem necessary with respect to information on any sex offenders registered under Chapter 23 (19.2-387 et seq.) of Title 19.3. Such information may be obtained by contacting your local police department or the Virginia State Police, Central Criminal Records Exchange, at 804-674-2000 or on the Internet at http://sex-offender.vsp.virginia.gov.sor/.

#### **Release Of Information:**

I, in connection with this application, authorize all Companies, Credit Agencies, Banks, Persons, Educational Institutions, Law Enforcement Agencies, Military Services and current and former Employers, current & former Landlords to release information, they may have about me to 4 Seasons Vacation Rentals & Sales and their agents, and release them from any liability or responsibility for doing so. I authorize procurement of an investigative consumer report, credit history report and background history report and understand that such a report may contain information about my character and personal reputation and that further information may be made available upon written request within a reasonable period of time. I also understand that a criminal background check will be obtained relevant to this application. I understand this notice will also apply to any further update reports that may be requested.

Applicant's Printed Name:			
Social Security #:	Date Of Birth:		
Applicant's Signature:			(Seal)
Applications submitted on:/	/ at	(Time)	a.m./p.m.
		TH	ANK YOU!

PLEASE BRING TH		R TENANCY ICATION TO OUR OFFICE, or FAX TO: 336-246-2701 ~ THANK YOU!
Application is hereby made to lease	the premises at	
beginning on the day of	(month). Lease ter	rm requested:
Pet Fee: \$	Monthly Rent: \$	
APPLICANT INFORMATIO	N	
Name:		SS#:
Date of Birth:///////	NCDL#	
Current Address:		
Current Phone #:	Но	ow long at current address:
Cell Phone #:	E-mail:	
If applicable, relationship to co-app	licant:	
□ Rent or □ Own Monthly Rent:	\$	Do you have a lease: 🗌 Yes 🗌 No
Expiration Date://///////	Notice Give	en: 🗆 Yes 🗆 No
Name of current landlord:		
Landlord Phone#:		Fax#:
Name of former landlord:		
Former Address:		
Landlord Phone#:	Fax#:	
Reference:	Relationship:	Phone:
Reference:	Relationship:	Phone:
Do you own real estate: $\Box$ Yes $\Box$	No If yes, where:	
In case of emergency, notify: Na	ame: (not co-applicant)	)
Relationship: Address:		Phone #:
List all persons who will occupy Name Relationship	the rental premises Date of Birth	SS#
		//
		//
		//
		//

4 Seasons Vacation Rentals & Sales · 370 S Main St · PO Box 211 · Jefferson, NC 28640 · 336-246-2700 · www.4SeasonsVacations.com

## **EMPLOYMENT INFORMATION**

Employer:	
Employer's Address:	
Occupation:	Length of Employment:
Supervisor:	Telephone #:
Salary: \$	per (week/month/year)
Additional income* amount \$ *Applicant need not disclose alimony, child suppor be considered for the purpose of the application fo	Source
If military, complete the following (a	attach copy of orders/LES): Active Military $\Box$ Yes $\Box$ No
Duty Station:	Rank/Rate:
Report Date://////	End of current enlistment:///
Have you ever been sued or evicted rela	ections?  Yes No Yes No If yes, provide discharge date:// Neted to a rental unit? Yes No sure? Yes No Do you have any liens? Yes No es No No No
Outstanding Debts Payment	Outstanding Debts Payment
\$	\$
\$	\$
	\$
BANKING & INSURANCE INF	
Bank:	Account #:
Bank:	Account #: