

RENTAL APPLICATION

_____ (together with all adult occupants as referred to herein, collectively, "APPLICANT") hereby makes application to Ocean Atlantic Sotheby's International Realty (hereinafter "Ocean Atlantic Sotheby's") for the lease of (Address): _____
Beginning on the _____ day of _____, 20_____, for the monthly rent of \$_____ payable in accordance with an executed lease. Lease term requested: _____.

It is understood that the Premises are to be used as a residential dwelling to be occupied by none other than those persons listed in this application, and that occupancy is subject to vacancy by the departing occupant. Any and all personal property placed in the Premises shall be at the Applicant's risk and the Applicant is responsible for insuring the same. APPLICATION IS BEING MADE FOR THE PREMISES IN ITS PRESENT CONDITION, UNLESS OTHERWISE INDICATED. This Application consists of five pages. The truth of the information contained herein is essential, and if the landlord/owner or owner's designated agent deems any answer or statement herein to be false or misleading, it shall be considered that any lease granted by virtue of this application may be cancelled at option of the landlord/owner or owner's designated agent.

NON-REFUNDABLE RENTAL PROCESSING FEE in the amount of **\$50.00 per adult occupant** is included with this Application. All adult occupants must be processed and be a party to the lease. The application process may take up to a minimum of five (5) working days to complete after it is received. The applicant hereby waives any claim for damages by reason of non-acceptance of this application, which the landlord/owner or owner's designated agent may reject.

SECURITY DEPOSIT equal to a full month's rent (unless otherwise agreed upon) is due and payable on or before the effective date of the lease. This security deposit is payable to the Landlord/owner if he is managing the property, or to Ocean Atlantic Sotheby's International Realty, if they are managing the property. Please consult with your agent. If Applicant enters an agreement to lease a furnished unit, an additional deposit will be required not to exceed one month's rent. If Applicant enters an agreement to lease a pet friendly property, a pet deposit will be required for each pet, unless such pet qualifies under §5514 of the Delaware Landlord Tenant Code. All deposits will be held by Ocean Atlantic Sotheby's in a non-interest bearing escrow account according to the laws in the State of Delaware.

1. The Applicant has no leasehold interests in the rental property until (1) the Applicant has been approved and (2) there is a fully ratified lease.
2. Occupancy of residences shall conform to applicable zoning laws; applicable by-laws, and/or property owners' association rules and regulations.
3. The Listing Broker can furnish a copy of the Lease form to the applicant for review. When Applicant receives notification of approval from the landlord/owner or owner's designated agent, the Applicant agrees to execute a lease in accordance with the terms of the Application. NOTE: Applicant agrees to execute a lease within three business days from notification of acceptance. If the property for which you are applying is managed by Ocean Atlantic Sotheby's you will be required to remit all monies with certified funds at the time of lease (unless otherwise agreed upon). The landlord/owner or owner's designated agent reserves the right to rescind acceptance and resume marketing until lease ratification. The Applicant(s) agree to apply for all utilities/services prior to taking occupancy of the leased premises and agree to pay for all applicable utilities/services, i.e. electricity, gas, water, sewer, fuel, refuse, and will pay necessary deposits.

The Applicant(s) hereby authorize Ocean Atlantic Sotheby's, its employees and/or agents and any credit bureau or other investigative agency employed by such firm, to investigate and to report and disclose to the landlord/owner or owner's designated agent the results of the references herein listed, statements and other data obtained from any other person

pertaining to credit, employment, rent history and financial responsibility or criminal record of the Applicant(s). Applicant(s) hereby authorize the references herein listed, to disclose or report any information requested by Ocean Atlantic Sotheby's and/or agents. An authorization form is included in this application package.

Be certain that you have completed all five pages of the Application in its entirety and attach the application fee of \$50.00 for each adult applicant included in this application. Include the following:

1. Copies of Driver's licenses for all occupants;
2. Copies of pay stubs for most current two consecutive pay periods, or some form of verification of income;
3. Contact information from current and previous landlords. Include their name, address and contact phone number for verification.

ALL APPLICATIONS WILL BE PROCESSED IN ACCORDANCE WITH ALL APPLICABLE LAWS, INCLUDING FAIR HOUSING AND ADA.

AGENCY DISCLOSURE (CIS): Parties acknowledge that Ocean Atlantic Sotheby's is the listing broker for the Owner/Landlord. Applicants may wish to retain their own agent, which may include another Ocean Atlantic Sotheby's agent but in any event, Applicants should understand that Rental Listing Agent represents the Owner/Landlord and not the Applicants. Ocean Atlantic Sotheby's offers rental in accordance with Federal and State Fair Housing Laws. CIS is included in this package. Please Initial _____/_____

Applicant Signature

Date

Applicant Signature

Date

Applicant Signature

Date

Applicant Signature

Date





Ocean Atlantic

Sotheby's INTERNATIONAL REALTY

Rental Application For Office Use Only

Date: _____

Agent: _____

Application Fee Paid _____

The undersigned hereby makes application to rent: _____

Please tell us about yourself.

Applicant Name:

Form fields for Applicant Name: Date of birth, SSN, Phone, Driver's License #, State, Email Address, Cell Phone

Co-Applicant Name (if married):

Form fields for Co-Applicant Name: Date of birth, SSN, Phone, Driver's License #, State, Email Address, Cell Phone

Names of all other Occupants under the age of 18 years:

Empty text field for names of other occupants

Total # of Occupants:

Form fields: How many Pets, Kind of Pet/Breed/Weight/Age

Please give your residence history for the past 3 year beginning with the most current.

Letters of reference provided by landlord is required for all current and previous rentals.

Current address:

Form fields for Current address: City, State, Zip Code, Own/Rent, Monthly Payment or Rent, How long

Reason for leaving:

Rental Reference (Name & Phone Number):

Reason for leaving:

Employment History

Military: Attach a copy of latest Leave & Earnings Statement and/or Transfer Orders. Self-Employed: Attach a copy of past year (1 year) U.S. Tax Form 1040 & Schedule C.

Hourly/Weekly Employees: Attach copies of your last two pay stubs.

Applicant(s) shall provide, if necessary, a salary key or authorization code if verification is to be obtained via an automated employment and salary verification service.

Current Employment Status: [] Employed Full-Time [] Employed Part-Time [] Student [] Retired [] Not Employed

Present Employer:

Form fields for Present Employer: Employer Address, How Long

Supervisor:

Form fields for Supervisor: Phone, E-Mail

Form fields for Supervisor: Position, Gross Monthly Salary, Other Monthly Income

If there are other sources of income you would like us to consider, please list income, source and person who we could contact for confirmation. You do NOT have to reveal alimony, child support or retirement income unless you want u to consider the income to qualify for this rental.

Amount \$ _____ per _____ Source _____ Phone # _____

Co-applicant Employment Information

Current Employment Status: [] Employed Full-Time [] Employed Part-Time [] Student [] Retired [] Not Employed

Present Employer:

Form fields for Present Employer: Employer Address, How Long

Supervisor:

Form fields for Supervisor: Phone, E-Mail

Form fields for Supervisor: Position, Gross Monthly Salary, Other Monthly Income

If there are other sources of income you would like us to consider, please list income, source and person who we could contact for confirmation. You do NOT have to reveal alimony, child support or retirement income unless you want us to consider the income to qualify for this rental.

Amount \$ _____ per _____ Source _____ Phone # _____

Financial History

Your Bank(s):	City / State / Branch & Account # / Type	Phone:
1.		
2.		
3.		
Your Credit References:	City / State / Type / Account #	Phone:
1.		
2.		
3.		

Have you or Co-Applicant(s) ever:

- 1. Been sued for non-payment of rent? YES NO
- 2. Been convicted or had your lease terminated? YES NO
- 3. Been sued for damage to a rental property? YES NO
- 4. Broken a rental agreement or lease? YES NO
- 5. Declared Bankruptcy? YES NO If yes, how long ago were you discharged?

Additional Information

Number & descriptions of automobiles, motorcycles, vans, trucks, trailers, campers, RV's, boats, commercial vehicles, etc.

Make/Model	Year	Color	Tag # / State

Other vehicles (motorcycles, trailer, camper, boat, etc):

Emergency Contact

Name of a person not residing with you:

Address:

City:	State:	Zip Code:
Phone:	Relationship:	

References

Name:	Address:	Phone:
1.		
2.		
3.		

I authorize the verification of the information provided on this form as to my credit and employment. I have received a copy of this application.

Signature of Applicant:	Date:
Signature of Co-Applicant:	Date:
Signature of Co-Applicant:	Date:
Signature of Co-Applicant:	Date:



CONSENT TO OBTAIN CONSUMER REPORTS FOR TENANT SCREENING PURPOSES

In connection with, and for the duration of, my tenancy with you, I understand that you may obtain consumer reports for screening purposes that relate to my credit and employment history. This information will, in whole or in part, be obtained from Experian eSolutions; telephone 800.831.5614. I authorize, without reservation, any party, institution, or agency contacted by American Tenant Screen, Inc., or this real estate firm to furnish the above mentioned information and authorize Ocean Atlantic Sotheby's International Realty to provide a copy to the owner of my potential rental property that is obtained from ATS.

_____/_____/_____-_____-_____
Applicant Name ***Middle Name is required** Date of Birth* Social Security Number

***Date of Birth is requested in order to obtain accurate retrieval of records.**

Alias/Previous Name(s)

Current Address City State Zip Code

Driver's License # State Rental Property Applying For