



Residential Lease Application

Welcome to Baylor Management Corporation, Property Management.

Each person over the age of 18 who will reside in the property is required to fill out an application. Please be sure to complete all sections as partial applications cannot be processed.

The following items must be included:

- **Application Fee (per Applicant)** – *A cashier's check or money order for \$50.00 made payable to "Baylor Management".*
- **Security Deposit (per property)** - *A cashier's check or money order equal to one month's rent, made payable to "Baylor Management".*
- **Photo Identification** - *One form of photo ID is required. Acceptable forms are: Driver's License; government issued ID card; passport; or permanent resident alien card.*
- **Paystubs** - *Three most recent paystubs or commitment letter from new employer. If military, current LES. If self-employed, include last two year's tax returns.*

Completed application package, along with all fees and deposit, must be submitted to the Property Manager of the property for which you are applying. If you are unsure where to apply, please contact our main office at 757-275-7158.

Thank you for choosing a Baylor Management Corporation, Property Management.

Baylor Management Corporation

Lease Application

Approved _____ / _____ / _____
 Denied _____ / _____ / _____

PROPERTY ADDRESS:				
Desired Lease Terms		Start Date:	Rent Amount:	Referred By:
Name:			SSN:	
Present Address:			Driver's License #:	
City, State Zip:			DOB:	
Phone Numbers: (c)		(w)	Email:	
Current Landlord:		Phone:	Length of Residency:	
Previous Address:				
Previous Landlord:		Phone:	Length of Residency:	
Present Employment			Previous Employment	
Employer:				
Position:				
Business Address:				
Business Phone:				
Type of Business:				
Name & Title of Supervisor:				
Length of Employment:				
Gross Income (monthly):				
If Military, Rate & Rank:				
If Self Employed, DBA:				
Other Income Type (attach verification):				
Other Income Amount (monthly):				
Other Occupants (Name, Birth Date, & Relationship to Applicant)				
1)		3)		
2)		4)		
Pet Information (Name, Type, Breed, Age, Color, Weight)				
1)				
Vehicle Information				
Car Make:	Year:	Model:	Color:	License Plate #:
Other Vehicle:	Year:	Model:	Color:	License Plate #:
Emergency Contact	Address		Phone	Relationship
Nearest Relative	Address		Phone	Relationship

Have you ever been evicted from any tenancy or had an eviction notice served on you? Yes No

Have you willfully/intentionally refused to pay rent? Yes No

Have you ever filed for bankruptcy? Yes No

Have you ever been convicted of a felony? Yes No

Do you own a pet? Yes No

Are you Active Duty Military or Reserve? Yes No

If "yes" to any, attach documentation

Applicant Signature: _____

Date: _____

Baylor Management Corporation

Lease Application

APPLICATION FEE/ APPLICATION DEPOSIT: Applicant must pay the amount equal to one month's rent and the application fee of \$50.00 must accompany this Application. The Application Deposit may be refundable to Applicant in accordance with "Obligation To Enter Into Lease Agreement" as stated in this Application. The Application Deposit will convert into the Security Deposit on the Commencement Date of the Lease Agreement. All Deposits must be paid in certified funds. All parties agree that the Application Deposit shall be deposited in the Agent's escrow account no later than five (5) banking days from the Lease Commencement Date. The application fee is nonrefundable and is accepted to cover the cost of the application process.

OBLIGATION TO ENTER INTO LEASE AGREEMENT: Upon submission of this Application by Applicant, Agent reserves the right to remove the Dwelling Unit from the available rent list. If this Application is approved and Applicant fails to rent the Dwelling Unit, Landlord shall be entitled to retain the Application Deposit. If this Application is denied by Landlord, the Application Deposit shall be returned to Applicant by 1st class, postage prepaid, US Mail to the Present Address listed on this Application within five (5) business days of the denial by Landlord.

RENTER'S INSURANCE: Applicant shall be responsible for insurance coverage (commonly referred to as "renter's insurance") for Applicant's personal property and shall add Agent as additional insured party to Applicant's Insurance. Virginia Residents are required to provide proof of Renter's Insurance prior to occupancy. Required minimum coverage is \$300,000 liability.

Applicant Does or does not currently have coverage.

GUARANTY: If the Lease Agreement will be guaranteed by a third party, a separate application must accompany this Application.

APPLICANT INVESTIGATION: Unless otherwise agreed in writing, applicant accepts the property in its current condition. Applicant should execute whatever due diligence Applicant deems necessary with respect to information on the Dwelling Unit, including without limitations, mold, lead-based paint, pests or insects, and any sexual offenders registered under Chapter 23 (sec. 19.2-387 et. Seq.) of Title 19. Information regarding registered sex offenders in Virginia may be obtained by contacting your local police dept. or the State Police Dept., Central Records Exchange at (804) 674-2000 or www.vsp.state.va.us. North Carolina residents may obtain information regarding sex offenders from North Carolina Dept. of Justice at (919) 716-6400 or <http://sexoffender.ncdog.gov>

INFORMATION CORRECT: Applicant hereby certifies that the information contained in this Application is true & correct to the best of the Applicant's knowledge. Applicant hereby authorizes Agent to conduct a credit check on Applicant and such background checks as determined appropriate by Agent to verify information provided herein by Applicant for approval or rejection of this Application. Agent may from time to time verify the information provided in this Application by obtaining information from third parties, including, without limitation, Credit Reporting Agencies. Signing this Application constitutes Applicant's written authorization of such for the duration of the lease and any renewals thereof.

DISCLOSURE OF BROKERAGE RELATIONSHIP: Applicant understands that Baylor Management Corporation and its Agents represent the Landlord in this transaction. Applicant is an unrepresented party.

I have read the terms and conditions of this Application. I understand this is a binding contract separate and apart from the Lease Agreement.

Applicant Signature: _____

Date: _____

For office use only:

The undersigned acknowledges receipt of the following fees and deposits:

An Application Deposit in the amount of \$_____, paid by cashier's check or money order which shall be deposited in the Authorized Agent's escrow account within five (5) days after the Commencement Date of the Lease Agreement.

SIGNATURE OF Recipient: _____ Date _____ / _____ / _____

Showing Agent's Name: _____ Firm Name: _____

Firm Address: _____

Phone Number: _____ Cell Phone Number: _____

LANDLORD VERIFICATION

THIS SECTION TO BE COMPLETED BY APPLICANT

TO: (Name and Address of Landlord)

Date: _____
Landlord Email: _____

Applicant/Tenant Name _____

Current Address _____

Applying to rent property located at: _____

Address

I hereby authorize release of my rental history/ information.

Signature of Applicant/Tenant

Date

The individual named directly above is an applicant/tenant of a rental housing that requires verification of rental payment history and care of rental property. The information provided will remain confidential to satisfaction of that stated purpose only. Your prompt response is crucial and greatly appreciated.

Sincerely _____
Property Manager

Return Form To:

Baylor Management Corporation
248 West Bute Street Ste 200
Norfolk, VA 23510
Maintenance@baylorcorp.com
Fax 757.625.6831

THIS SECTION TO BE COMPLETED BY LANDLORD

Dates of Residency: Lease Start Date: _____ Lease End Date: _____ Amount of Monthly Rent: \$ _____

Do they pay on time? YES NO If NO, how many times late: ____ Is the rent in arrears? YES NO Amount past due? \$ _____

Any NSF checks within the last twelve (12) months? YES NO If YES, how many: _____

Did the tenant give you proper notice for vacating? YES NO Reason for leaving: _____

Do you plan to, or did you, return the applicant's security deposit in full? YES NO If NO, please explain _____

Are you aware of any incidents relation to the applicant that required police presence at the premises? YES NO If YES, please explain. _____

Did you ever take Legal Action against them? YES NO If YES, please explain: _____

Would you rent to them again? YES NO If NO, please explain: _____

Additional Remarks: _____

Landlord's Signature

Landlord's Printed Name

Date

EMPLOYMENT VERIFICATION

THIS SECTION TO BE COMPLETED BY APPLICANT

TO: (Name and Address of employer)

Date: _____
Employer Email: _____

RE: _____
Applicant/Tenant Name

Applying to rent property located at: _____
Address

I hereby authorize release of my employee information.

Signature of Applicant/Tenant

Date

The individual named directly above is an applicant/tenant of a rental housing that requires verification of income. The information provided will remain confidential to satisfaction of that stated purpose only. Your prompt response is crucial and greatly appreciated.

Sincerely _____
Property Manager

Return Form To:

Baylor Management Corporation
248 West Bute Street Ste 200
Norfolk, VA 23510
Maintenance@baylorcorp.com
Fax 757.625.6831

THIS SECTION TO BE COMPLETED BY EMPLOYER

Employee Name: _____ Job Title: _____

Presently Employed: Yes ___ Date First Employed _____ No ___ Last Day of Employment _____

Current Wages/Salary: \$ _____ (circle one) Hourly Weekly Bi-weekly Semi-monthly Monthly Yearly Other _____

Average # of regular hours per week: _____ Year-to-date earnings: \$ _____ through ___ / ___ / ___

Overtime Rate: \$ _____ per hour Average # of overtime hours per week: _____

Commissions, bonuses, tips, other: \$ _____ (circle one) Hourly Weekly Bi-weekly Semi-monthly Monthly Yearly Other _____

List any anticipated change in the employee's rate of pay within the next 12 months: _____

If the employee's work is seasonal or sporadic, please indicate the layoff period(s): _____

Additional Remarks: _____

Employer's Signature

Employer's Printed Name

Date

Employer [Company] Name and Address

Phone

Fax

E-mail