

The Hancock Building LLC does business in accordance with the Fair Housing Amendments Act of 1988 and the Virginia Fair Housing Law, which specifies that it is illegal to discriminate against any person in residential real estate transactions because of race, color, sex, religion, physical or mental handicap, familial status, age or national origin. All lease signers must be at least 18 years of age or older.

RESERVATION FEE

A reservation fee of \$300.00 is required in order to reserve an apartment. \$50.00 is for the NON-REFUNDABLE APPLICATION FEE, and the remaining \$250.00 will go towards your SECURITY DEPOSIT. These fees are non-refundable in the event of a cancellation by the applicant. You may pay this amount by MONEY ORDER or CHECK. Cash is not accepted. Currently, your reservation fee will hold your apartment for up to thirty (30) days.

SECURITY DEPOSIT

A security deposit, which is equivalent to one month's rent is required before residency. Upon disapproval, any security deposit you have paid will be refunded. If your application is approved, the Security Deposit will be held until you vacate the premises. At that time, your Security Deposit, in addition with any interest due will be refunded in compliance with the terms of your lease and applicable Virginia Statutes.

PETS

We allow pets under 25pounds full adult weight. Resident shall pay a sum of \$300.00 pet fee. This is a fee not a deposit and is non-refundable. There are NO additional monthly charges.

QUALIFICATION RESTRICTIONS

Applicants for rental of a dwelling unit are subject to approval as follows:

<u>Income</u>: The total gross monthly income(s) of the applicant(s) must be equal or exceed an amount equal to 3 times the rental for that particular dwelling unit. Co-applicant's are accepted; however the gross monthly income of the co-applicant plus the applicant must equal or exceed five (5) times the rental for that particular dwelling.

<u>Credit</u>: CREDIT INFORMATION ON EACH APPLICANT WILL BE OBTAINED THROUGH A NATIONAL CREDIT-REPORTING AGENCY. CREDIT HISTORY SHOULD POSIT IVELY REFLECT THE APPLICANT 'S ABILITY AND WILLINGNESS TO MAKE PAYMENTS AS REQUIRED BY THE LEASE.

<u>Rental Record</u>: A satisfactory reference from previous landlord, i.e., compliance with the requirements of the lease as to payment of rent and observance of other obligations of the tenant specified therein.

LEASE, RULES AND REGULATIONS

All applicants must sign a lease and related rules and regulations before occupancy. We expect full compliance with these documents by all residents. Copies of these may be obtained from the rental staff for your preview.

SIGNATURE OF APPLICANT	SIGNATURE OF APPLICANT

$\underline{www.thehancockbuilding.com} \quad h \quad \underline{info@thehancockbuilding.com}$

RENTAL APPLICATION

DATE OF APPLICATION	APT SIZE DESIRED_		DATE DESIRE	D		
APPLICATION FEE REQUIRED	RENT AMOUNT \$	UN	IIT ADDRESS			
LEASE TERM DESIRED: □12 MONTH						
A FEE OF \$ IS ACCEPTED AS A RES	ERVATION DEPOSIT. THIS	S DEPOSIT CAN BE R	ETURNED TO YOU	J ONLY IF THE		
APPLICATION IS NOT APPROVED. UPON A	APPROVAL AND A SIGNEI	D LEASE, THIS RESER	RVATION FEE SHA	LL BECOME A		
PORTION OF THE SECURITY DEPOSIT REC	UIRED BY THE LEASE.					
As provided by the Government Data of personal information about him/hers information, or whether he/she may ref	elf must be informed	whether he/she	•			
Although you are not legally required inability to determine your eligibility for	-	e information requested your failure to do so war development.				
It is possible that information provided purposes in accordance with the Virgin safeguards of the Virginia Privacy Prote	ia Freedom of Informati					
NAMES						
(1)		DATE OF BIRTH	S OCIAL SECUR	UTV NO		
CURRENT ADDRESS						
NUMBER & STREET NAME	CITY	STATE	ZIP	HOW LONG?		
NAME OF APTS OR RENTAL AGENT		TELEPHONE		\$ RENT RATE		
PREVIOUS ADDRESS (IF CURRE	NT ADDRESS IS LES	SS THAN ONE Y	EAR)			
NUMBER & STREET NAME	CITY	STATE	ZIP	HOW LONG?		
NAME OF APTS OR RENTAL AGENT		TELEPHONE		\$ RENT RATE		
EMPLOYMENT						
(1)CURRENT EMPLOYER		HOW LONG?		TELEPHONE		
BUSINESS ADDRESS	CITY	STATE	ZIP			
YOUR POSITION		\$ SALARY	<u> </u>	PER		
ADDITIONAL SOURCE OF INCOME		\$ AMOUNT		PER		
FINANCIAL INFORMATION						
FINANCIAL INSTUTION		BALANCE				

MAKE	YEAR	COLOR	PLATE #	DESCRI	PTION	
MAKE	YEAR	COLOR	PLATE #	DESCRII	PTION	
DO YOU OWN AN	NY RECREATIONAL	VEHICLES? IF SO, PLE	EASE DESCRIBE			
	CY CONTACT WE CONTACT IN		NAL EMERGENCY (SO	OMEONE NOT LIVING V	VITH YOU)	
AST FIRST MIDE	DLE INITIAL				RELA	ATIONSHIP
number & stre	ET NAME			CITY	STATE	ZIP
HOME PHONE NU	JMBER			WORK PHONE NUMBER		
Are you a pi	ET OWNER? 🛮 No	O 🛮 YES IF SO, W	HAT KIND	WEIGHT	AGE	
	STATEMENT and that the abo		is being collected t		EFUNDABLE	dency. I/v
I/We underst authorize the signature is co	and that the abo owner/manage onsent to obtain	ove information ment to verify a such verification	ll necessary inform ons. I/WE FURTHI	o determine my/our el ation provided on this ER CERTIFY THAT T MY KNOWLEDGE.	ligibility for resi	d my/our

SIGNATURE OF APPLICANT

SIGNATURE OF APPLICANT

DAYTIME CONTACT NUMB	DAYTIME CONTACT NUMBER
EMAIL ADDRES	EMAIL ADDRESSS