Land Systems Inc.

7807 N. Dixie Drive

Dayton, OH 45414

(937)890-4222 Office (937)454-5698 Fax



Lease Application

\$40 Application Fee \_\_\_\_\_ \$300 Sec./Hold Deposit \_\_\_\_\_ Date: \_\_\_\_\_ Ck.# \_\_\_\_\_

Information About the Rental Unit (To Be Filled In By Landlord)				
Unit's Address:		City:	State:	Zip Code:
Owner:	Unit No.:	No. of Bedrooms:	Monthly Rent:	Move-In Date:

Information About Applicant		Information About Spouse	
Your Name:		Spouse's Name:	
Your Social Security Number:	Date of Birth:	Spouse's Social Security Number	Spouse's Date of Birth:
Driver's License Number:	State Issued In:	Spouse's Driver's License Number:	State Issued In:
Your Daytime Phone Number:	Marital Status:	Single() Married () Divorced () S	eparated ( )

Information About Your Current Address						
Your Current Address:	City:	State:		Zip Code:		
Landlord's Name:	Daytime Phone Numb	er:	Monthly Rent Paid	:		
Landlord's Address:	Move-In Date:		Expected Move-O	ut Date:		
Reason For Moving:						

Your Previous Address:	City:	State:	Zip Code:	
Previous Landlord's Name:	Daytime Phone Number:	I	Monthly Rent Paid:	
Previous Landlord's Address:	Move-In Date:		Expected Move-Out Date:	
Reason For Moving:				
-	City:	State:	Zip Code:	
Reason For Moving: four Previous Address: Previous Landlord's Name:	City: Daytime Phone Number:	State:	Zip Code: Monthly Rent Paid:	

Information About Yo	ur Employment			
Your Current Employer:			Employer's Phone Number:	
Your Current Employer's Address:			Supervisor's N	Name:
Your Position with Company:	Your Wages:	First Date of Em	First Date of Employment: Do You Expect to be Laid Off Soon?	
Additional Comments:	·	·		
Your Previous Employer:			Employer's Ph	none Number:
Your Previous Employer's Address:			Supervisor's N	Name:
Your Position with Company:	Your Wages:	First Date of Em	ployment:	Last Dat of Employment:
Additional Comments:				



Information About Spouse's Employment					
Spouse's Current Employer:			Employer's Phone	Number:	
Spouse's Current Employer's Address:			Supervisor's Nam	e:	
Spouse's Position with Company:	Spouse's Wages:	First Date of Em	ployment:	Does Your Spouse Expect to be Laid Off Soon?	
Additional Comments:					

Any Other Occupants MUST B	e Listed Here		
Name:	Relationship:	Name:	Relationship:
Name:	Relationship:	Name:	Relationship:

Information About	t Your Automobiles			
Make of Auto #1	Year:	Model:	Color:	License Number:
Make of Auto #2	Year:	Model:	Color:	License Number:

References		
Name of Credit Reference #1	Address:	
Name of Credit Reference #2	Address:	
Name of Personal Reference:	Address:	Phone:
Name of Bank Reference #1	Address:	
Name of Bank Reference #2	Address:	

General Information		
Has Applicant, Spouse, or any other occupant:	YES	NO
1. Filed for bankruptcy or reorganization of credit?		
2. Had an eviction filed against you or been evicted?		
3. Currently under an eviction with present landlord?		
4. Refused to pay rent when it was due?		
5. Paid rent late or when it was past due?		
6. Have a criminal record?		
7. Use drugs illegally?		
8. Been arrested or charged for drug usage or drug trafficking?		
9. Have any pets?		
If you marked YES above, please explain fully:		

In Case of Emergency, Please Notify:		
Name:	Relationship:	Phone Number:
Doctor:	Hospital:	Phone Number:

## **Consent to Release Information:**

I/We do hereby consent to and authorize the Landlord and/or any representative of Americhek, a professional screening service, to obtain, verify, and exchange information on any reports concerning me/us as are maintained by, but not limited to: City/County/State/Federal Law Enforcement agencies, present/past employers (including salary verifications), present/past Landlords. I understand that any information obtained may be considered by the Landlord and/or Americhek, in their or its sole discretion, as a factor in decisions they or it makes with respect to the real property for which I am applying to rent.

Furthermore, I hereby release and hold harmless all agents, owners, affiliates, officers, directors, employees, credit reporting agencies, present/past employers, present/past landlords, all officers and employees that shall provide information to the landlord and/or Americhek upon request, from any and all claims, demands, suits, or expenses arising from or related to the content, validity, or handling of said reports.

I/We hereby certify that the information contained in this application for lease is accurate, full, and complete. Any discrepancies or lack of information will result in immediate rejection of this application. I/We understand that this is an application and does not constitute a lease agreement in whole or in part. The **\$300** holding deposit is not refundable if the application is accepted and I/We fail to move in. I/We hereby acknowledge a non-refundable application fee of **\$40** to be used in the processing of this application.

SIGNATURE:	
JIGNALOKL.	

DATE:
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SIGNATURE:

DATE:		





## 7807 N Dixie Dr • Dayton, OH 45414 • 937/890-4222

I/We hereby understand, acknowledge and agree to the following information that has been explained to me/us prior to applying for an apartment with Land Systems, Inc.

1. \$40 application fee is **<u>non-refundable</u>** and must be paid by **CASH OR MONEY ORDER ONLY**.

2. \$300 security hold deposit is **non-refundable** if I/We are approved without any special conditions and then decline the apartment. The \$300 security hold must be paid by **CASH OR MONEY ORDER ONLY**. No exceptions will be made.

3. If I/We wish to cancel this lease at the end of a term, I/We must give Land Systems, Inc. at least **60 days** written notice **prior to the end of the term**. At the expiration of the term, the Lease will automatically continue to a **60 day** basis. Any notice canceling a 60 day lease must be received at least **60 days prior to the date rent is due and will not be effective until on or after that date**.

4. I/We will show proof that **ALL** utilities which I/We are responsible for are transferred into my/our name(s) **PRIOR** to picking up the keys and moving in. If I/We cannot show proof, \$100 will be deposited with Land Systems, Inc. until proof of the transfer is established and the **FINAL BILL** is received by the Owner. Any usage due to the Owner shall be deducted from this deposit and reimbursed to the Owner prior to returning said deposit to me/us.

Land Systems, Inc.

Lessee:

Rental Office Representative

Date

