APPLICATION FOR LEASE

- 1. A NON-REFUNDABLE \$30 application fee must be paid before the application is processed.
- 2. All adults who will be living in the home must fill out and sign this application.
- 3. Answer all questions fully and truthfully. All information will be carefully checked. **False information will result in automatic rejection** of this application. If you have questions, call our office at 513-863-3336.
- 4. Return application with a copy of 1 month (4 weeks) most recent paystubs, any other letters or statements you have to show your income, and a copy of your state ID to:

HHP Properties

1 N Commerce Park Dr, Ste 312 OR Fax (513) 348-1998 OR Email: leasing@HHPproperties.com Cincinnati, OH 45215

I/We are applying for a at at	for move-in date of				
APPLICANT	CO-APPLICANT or CO-SIGNER				
Full Name (First Mi. Last)	Full Name (First Mi. Last)				
Maiden / Other Last Name(s)	Maiden / Other Last Name(s)				
Date of Birth Social Security	Date of Birth Social Security				
Phone (Cell) () Do you text message?	Phone (Cell) () Do you text message?				
Phone (Hm) ((Wk) ()	Phone (Hm) ()(Wk) ()				
Email:	Email:				
# Adults Who Will Live in Home# Minors	Will you live in the home?				
Emergency Contact Name:	Emergency Contact Name:				
Relationship Phone	Relationship Phone				
Minors / Others who will reside in home:					
Name: Date of Birth	Name: Date of Birth				
Name: Date of Birth	Name: Date of Birth				
PRESENT ADDRESS Own Rent	PRESENT ADDRESS Own Rent				
StreetApt. No	StreetApt. No				
City State Zip	City State Zip				
Dates (MM/YY) From To	Dates (MM/YY) From To				
Owner Name Owner	Owner Name				
Phone ()Amount you pay \$	Owner Phone ()Amount you pay \$				
Utilities you pay \$ (check): Heat Water Elec	Utilities you pay \$ (check): Heat Water Elec				
WHY ARE YOU MOVING?	WHY ARE YOU MOVING?				
PREVIOUS ADDRESS Own Rent	PREVIOUS ADDRESS Own Rent				
StreetApt. No	StreetApt. No				
City State Zip	City State Zip				
Dates (MM/YY) From To	Dates (MM/YY) From To				
Owner Name	Owner Name				
Owner Phone ()Amount you paid \$	Owner Phone ()Amount you paid \$				
Utilities you pay \$ (check): Heat Water Elec	Utilities you pay \$ (check): Heat Water Elec				
WHY DID YOU MOVE?	WHY DID YOU MOVE?				
CURRENT EMPLOYER	CURRENT EMPLOYER				
Name of Employer	Name of Employer				
Street Phone	Street Phone				
City State Zip	City State Zip				
Job Title Pay Rate \$/	Job Title/Pay Rate \$/				
Full Time or Part Time Hours per Week	Full Time or Part Time Hours per Week				
Dates (MM/YY) From To	Dates (MM/YY) From To				

APPLICANT 2ND	JOB or P	PREVIOUS EMPLOYER	CO-APPLICA	NT 2ND JOB	or PF	REVIOUS EMPLOYER	
Name of Employer			Name of Employ	yer			
	Phone Phone Street Phone						
City	State	Zip	City	State	Z	ip	
Job Title	Pay Ra	ate \$/_			-		
Full Time or Part Tir	or Part Time Hours per Week Full Time or Part Time				e Hours per Week		
Dates (MM/YY) From _		To	Dates (MM/YY) From To				
APPLICANT AND CO-APPLICANT MUST BOTH ANSWER THESE QUESTIONS							
ANSWER "YES" or "NO". If "Yes", explain. If you have any Applicant Co-Applic Explanation							
questions about this section, please call our office							
Have you ever declared ba		See the see of Set of the see of the day					
vacate a property for any r		ice, been evicted, or asked to					
Have you ever had rental security deposit not returned?							
	-	legal proceedings against you?					
Have you been convicted of any crime, misdemeanor or felony? (Except minor traffic violations)							
Do you have renter's insur-							
Do you have any pets? Ho	w many and wha	at type?					
Do you smoke?							
A	plicant Bank	Accounts		Co-Applicant	Bank Ac	counts	
Bank Name		Approximate Balance	Bank Name		Approximate Balance		
		\$			\$		
		\$			\$		
		limony, child support, or separate maintenance income need not be revealed if the Applicant or Co- pplicant does not wish to have it considered as a basis for paying Description					
Which relative or friend could assist you should you run into financial difficulties?							
Name Relation Phone Address Zip Code							
Address				_ Zip Code			
Are they currently employed? Do they own real estate? Would they be willing to co-sign lease?							
How did you hear abo	ut the propert	y?					
How long do you intend to live in the property?							
I/we certify under penalty of legal action that I/we have answered all of the above questions to the best of my ability. I/we hereby authorize _HHP Properties_ and/or any Credit Information Services to obtain information concerning my past credit, and/or tenant-landlord history now or anytime in the future. I hereby authorize any of the following sources, including but not limited to landlords, public or privately owned utilities, current or past creditors, governmental housing agencies, and/or other credit reporting agencies to release any information to _HHP Properties_ or any Credit Information Service concerning my/our past credit and/or tenant-landlord history. I hereby release any of the above sources, their officers, agents, or employees from any liability for damages of whatsoever kind or nature whether caused by negligence or otherwise which may at any time result to me/us by reason of compliance with the above mentioned inquiry which may include the answering of specific questions and the giving of any information concerning my/our past records.							
Applicant Signature					Date		
Co-Applicant Signature					Date		
4-1					Date		