







Application is not complete until page 5 is signed. Unless this application is initialed on each page it will not be processed. (If more than two persons are applying, use additional applications.)

| REQUIRED TO SUBMIT: |
|-----------------------------------|
| (Certified Funds or Credit Cards) |
| Application (Non-Refundable) |
| Fee \$ |
| Holding Fee \$ |
| Amt. Received \$ |

(Payment Method)

Evidenced by:

| PROPERTY ADDRESS | | | | | | |
|--|---------------|------------------|-----------------------|--------------------|-----------------|------------------------|
| | OTHER | AGENT INFO | RMATION | | | |
| REFERRAL COMPANY | | Realty One | | | MLS # | |
| AGENT: Mark C | oronado | | Public ID# | 206233 | License# | s.171822PC |
| | RENT/DE | POSITS AND (| OTHER FEES | | | |
| Rent: From | \$ | | | | | |
| TOTAL | \$ | | | | | |
| Please note that any and all rent, | Agree APPL | ment shall be co | ontrolling. MATION | | identified in | the Lease |
| PROPOSED MOVE-IN DATE | | | | | | |
| APPLICANT: | | | | | | |
| HOME PHONE # | | OTHER PHO | ONE | | | |
| EMAIL | | | SSN# | | | |
| DL#STA | ATE | BIRTH DATE | E | | | |
| Rental Application Rev. 11.19 1532732v.11532732v.1 | | Page 1 of 5 | © 2019 Greater | App Las Vegas A | licant's Initia | ıls: [] f REALTORS® |

| CURRENT ADDRESS: | | |
|-----------------------------|-----------------------|----------------|
| | | |
| LANDLORD NAME / MOR | ГGAGE HOLDER: | PAYMENT: |
| PHONE # | FAX # | EMAIL ADDRESS: |
| HOW LONG? | (PLEASE CIRCLE ONE) _ | OWNED OR RENT |
| REASON FOR LEAVING _ | | |
| | | |
| | | |
| | | PAYMENT: |
| PHONE # | FAX # | EMAIL ADDRESS: |
| HOW LONG? | (PLEASE CHECK ONE) | OWNED OR RENT |
| REASON FOR LEAVING _ | | |
| | | |
| HOW LONG? | EMPLOYED | O AS |
| ADDRESS: | | |
| CITY, STATE, ZIP | | |
| PHONE # | | _FAX# |
| SALARY: \$ | PER/MO SUPERVIS | SOR: |
| OTHER INCOME: SOURCE | 3 | AMOUNT: \$ |
| PRIOR EMPLOYER (IF LESS | S THAN 3 YEARS): | PHONE # |
| HOW LONG? | EMPLOYED | O AS |
| SALARY: \$ | PER/MO SUPERVIS | SOR: |
| CREDIT REFERENCES: BA | NK | ACCT. # |
| ADD PERSONAL REFERENCES: | DRESS | |
| | | PHONE # |
| | | ATIONSHIP |
| | | PHONE # |
| | | ATIONSHIP |
| | | |

CO-APPLICANT INFORMATION

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(Please note: There may be additional fees for co-applicants.)

| Please identify any | and all Co-Applicar | nts along wi | th their telephon | e number an | d email addı | ress: | | |
|---------------------|--|--------------|---------------------------------|---|----------------|------------|--|--|
| APPLICANT NAME | | PHON | E NUMBER | | E-MAIL ADDRESS | | | |
| 1. | | | | | | | | |
| <u>2.</u> | | | | | | | | |
| <u>3.</u> | | | | | | | | |
| <u>4.</u> | | | | | | | | |
| For Privacy purpo | oses, all Co-Applica | nts must si | ıbmit their own | <u>individual</u> | Rental App | lication. | | |
| | | <u>v</u> | EHICLE INFO | ORMATION | <u>N</u> | | | |
| AUTOMOBILES: | | | | | | | | |
| MAKE | MODEL_ | | LIC# _ | | STA | ATEYR | COLOR | |
| MAKE | MODEL_ | | LIC# _ | | STA | ATEYR | COLOR | |
| MAKE | MODEL_ | | LIC# _ | | STA | ATEYR | COLOR | |
| IN ADDITION TO NAME | APPLICANT(S), C | | OTHER OCC RSONS WHO W AGE | VILL RESID | DE AT PREM | | HONE NUMBER | |
| and FHA) STOP! | vice animal, emotic Your animal is not vely "Assistance An | a "Pet." P | | sistance ani | | | efined in CFR, NRS, Emotional Support | |
| PETS? (Y/N) | IF YES, PLEA | ASE COMP | PLETE THE FO | OLLOWING | G : | | | |
| 1. The pet or NAME | pets are identified a | BREED | | WEIGHT | GENDER | NEUTERED? | LICENSE NO. | |
| | IXGE | 2 | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | CENDER | 1,201ERED. | 2,02,102,1104 | |
| | | | | | | | | |
| | | | | | | | | |

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- 2. Applicant certifies to Landlord that the pet(s) is in good health, and as proof therefore, a certificate of good health from a licensed veterinarian is attached. In addition, a clear photo of each pet is attached to this application with the pet's name on the back.
- 3. Applicant will keep pets on a leash when not in a fenced backyard area and will clean up all waste on the Property as well as in any common areas.
- 4. If the Property is subject to a Common Interest Community, Applicant will abide by all rules and regulations and CC&R's with respect to pet ownership.
- 5. Applicant acknowledges and understands that the representations herein are considered to be material provision of the Residential Lease Agreement.
 - 6. Applicant requests Landlord's approval to keep the above-name pet(s) in and/or on the Property.
- 7. Should the pet(s) identified above create a breach in the terms of the existing lease agreement, the Pet Approval shall be immediately revoked upon written notice to the tenant as required in the lease agreement.
- 8. Applicant shall obtain an insurance policy that includes pet coverage. The Landlord and Property Manager shall be named additional insureds on the policy. Tenant further agrees to hold both Landlord and Property Manager harmless relative to the activity and behavior of any and all pets kept at the Property.

HAS THE APPLICANT EVER FILED BANKRUPTCY? ______ GIVE DETAILS ______ HAS THE APPLICANT EVER BEEN EVICTED? _____ EXPLAIN ______ HAS THE APPLICANT EVER WILLFULLY REFUSED TO PAY RENT WHEN DUE? _____ EXPLAIN _____ HOW LONG DOES APPLICANT PLAN TO LIVE HERE? _____ IF YES, PLEASE LIST TYPE (e.g. waterbed, aquarium, etc.) _____ DOES APPLICANT PLAN TO USE LIQUID FILLED FURNITURE? _____ IF YES, PLEASE LIST TYPE (e.g. waterbed, aquarium, etc.) ______ (This includes, but is not limited to the use of all tobacco, smoking related products, electronic cigarettes, vaping pens or other instruments that cause smoke or vapor to be emitted.) EMERGENCY CONTACT APPLICANT IN CASE OF EMERGENCY, PERSON TO NOTIFY:

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RELATIONSHIP: PHONE #

Applicant's Initials: [_____]

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DISCLOSURE

PLEASE READ CAREFULLY BEFORE SIGNING

| 1. APPLICANT UNDERSTANDS THAT | | | | IS |
|--|-----------------|---------------|----------------------|-----------------|
| THE LEASING AGENT AND REPRESENT | | | OF THE PREMISES | S LOCATED AT |
| | | AT A M | ONTHLY RENT OF \$ | • |
| 2. APPLICANT DECLARES THAT THE | INFORMATION | CONTAINED H | EREIN IS TRUE AND | CORRECT, AND |
| APPLICANT AUTHORIZES AN EMPLOYMENT | CHECK, CRIMINA | L RECORDS CH | ECK, CREDIT CHECK, V | ERIFICATION OF |
| REFERENCES AND CURRENT AND PREVIOUS | S LANDLORDS. | | | |
| 3. APPLICANT HEREBY PAYS \$ | AS A NON-I | REFUNDABLE A | PPLICATION FEE AND | \$ AS |
| HOLDING FEE. IF APPLICANT IS DECLINED |), THE HOLDING | FEE WILL BE R | EFUNDED WITHIN | BUSINESS |
| DAYS. IF, AFTER APPROVAL, APPLICANT I | DECIDES NOT TO | FULFILL THIS | AGREEMENT BY COM | PLETING LEASE |
| AGREEMENT AND PAYING SECURITY DEPO | SIT, HOLDING FE | E SHALL BE FO | RFEITED BY APPLICAN | T PURSUANT TO |
| THE TERMS OF THE HOLDING FEE AGREEME | ENT. | | | |
| 4. APPLICANT AGREES TO EXECUTE A | LEASE AGREEM | ENT BEFORE P | OSSESSION IS GIVEN A | AND TO PAY THE |
| RENT AND SECURITY DEPOSIT WITHIN | BUSINESS DA | AYS AFTER BEI | NG NOTIFIED OF ACCE | PTANCE OF THIS |
| APPLICANT. | | | | |
| 5. LANDLORD AND AGENT WILL NOT | BE BOUND BY A | NY REPRESENT | ΓATIONS, AGREEMENT | S OR PROMISES, |
| WRITTEN OR ORAL, MADE BY LANDLORD O | OR AGENT UNLES | S CONTAINED | N THE LEASE AGREEN | MENT SIGNED BY |
| LANDLORD OR LANDLORD'S AGENT. | | | | |
| 6. APPLICANT HAS REVIEWED THE P | | | | |
| WEBSITE SHOWING THE POSSIBILITY OF PA | ST OR CURRENT | LIENS RECORDI | ED AGAINST THE PROP | PERTY AS OF THE |
| DATE OF THIS APPLICATION. APPLICANT AC | GREES TO LEASE | THE PROPERTY | SUBJECT TO THIS INFO | ORMATION, AND |
| HOLD THE LANDLORD AND ITS AGENTS HA | ARMLESS BASED | UPON THIS IN | FORMATION AND FUT | URE USE OF THE |
| PROPERTY. | | | | |
| 7. APPLICANT DOES HEREBY RELEA | | | | |
| DAMAGES OR LIABILITIES WHICH MIGHT | | | | |
| PRESENT LANDLORD AND ALL PREVIOUS | | | | |
| INJURY WHATSOEVER CAUSED BY PROVID | | | | |
| 8. APPLICANT UNDERSTANDS AND AC | | | | |
| FOR DENIAL OF RENTAL TO APPLICANT. | | | | |
| PRECEDENT TO ANY BINDING LEASE AGREE | | | | |
| 9. APPROVAL FOR RESIDENCY IS MA | | | | |
| ORIGIN, AGE, GENDER IDENTITY OR EXPI | RESSION, FAMILI | AL STATUS, SI | EXUAL ORIENTATION, | ANCESTRY, OR |
| HANDICAP. | | | | |
| 10. APPLICANT UNDERSTANDS THAT A | | | | |
| LEASE AGREEMENT IN THE FORM SUBMITT | ED AND DEPOSIT | OF RENT AND S | SECURITY DESCRIBED | ABOVE. |
| | | | | |
| | DATE | TIM | ME | |
| SIGNATURE OF APPLICANT | | | | |
| | | | | |
| PRINT NAME | | | | |
| | | | | |
| | | | | |

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