



Type of unit desired:	Expected move-in date:	Apartment number assigned:
Monthly rent:	Date lease begins:	Date lease ends:
Associate Initials	Date/Time Returned	Special Offer

Management Services Corporation is a Licensed Real Estate Broker in the Commonwealth Of Virginia. Management Services Corporation and its employees work for the owners of the rental properties, which they manage. Many of the employees are Licensed Virginia Real Estate Salespersons and Brokers. Employees of an owner's property are not required to have a Virginia Real Estate Person's License. Any licensed Real Estate Sales Person or Broker will present to you a business card representing his/her status as a Real Estate Sales Person or Broker. Management Services Corporation and the owners that management services represents do business in accordance with the Federal Fair Housing Laws. It is illegal to discriminate against any person because of Race, Color, Religion, Sex, Handicap, Familial Status, National Origin and Elderliness.

Si usted no comprende ingles, as necesario que obtenga alguien que traduzca esta noticia. Muchas Gracias.

**PERSONAL INFORMATION**

Full Legal Name:		E-mail Address:		Date of Birth:	
Social Security No.:		Driver's License No.:		Make of auto and Tag No.:	
Home Phone:		Work Phone:		Cell Phone:	
Are you a United States Citizen Y _____ N _____ If the answer is no, please fill out the Non-U.S. Citizen Supplemental Application and applicant must provide the necessary documentation to verify their legal status. Pre-approval is contingent on receiving this paperwork					
Present Address:				City/State/Zip Code:	
Landlord/Mortgagee Name:				Phone:	
How long have you lived at this address?		Do you rent/own		Monthly Rent/Mortgage Amount (required)	
Previous Landlord/Mortgagee Name: (If current is less than two years)				Monthly Payment:	

**SPOUSE'S INFORMATION**

Full Legal Name		Email Address:		Date of Birth:	
Social Security No.:		Driver's License No.:		Make of Auto and Tag No.:	
Work Phone:		Cell Phone:			
Are you a United States Citizen Y _____ N _____ If the answer is no, please fill out the Non-U.S. Citizen Supplemental Application and applicant must provide the necessary documentation to verify their legal status. Pre-approval is contingent on receiving this paperwork					

Please complete the information below for any other persons that will be occupying the apartment:

- 1) Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_
- 2) Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_
- 3) Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Emergency Contact: (Please list the person you would like us to notify in case of an emergency situation):

Name: _____	Their relationship to you: _____
Address _____	City _____
State/Zip _____	Phone _____
Email address _____	

**EMPLOYMENT INFORMATION**

Present Employer:		Position:		Length of Employment:	
Immediate Supervisor:		Phone No.:		Gross Monthly Income: (Before Taxes) \$	
City/State/Zip					
Previous Employer (if less than 2 years):				Position:	
Immediate Supervisor:		Phone No.:		Salary: \$	
Spouse's present Employer:		Position:		Length of Employment:	
Immediate Supervisor:		Phone No.:		Salary: \$	
City/State/Zip					
Previous Employer (if less than 2 years):				Position:	
Immediate Supervisor:		Phone No.:		Salary: \$	

