



RENTAL APPLICATION



1 FAIR HOUSING Nevada strictly abides by the Federal Fair Housing Act, Nevada Fair Housing Law and principles of equal
2 opportunity. It is strictly prohibited to discriminate on the basis of race, religious creed, color, national origin, disability, sexual
3 orientation, gender identity or expression, ancestry, familial status or sex.

4
5 APPLICANTS The application fee is \$ 0.00 per _____.

6 Fee must be paid by cash, cashier's check money order debit/credit card.

7 Any fee charged by employer to verify employment must be paid by the applicant in advance. Fees are non-refundable, and must
8 be paid separately from any security deposits or pet fees.

9
10 CREDIT CRITERIA, PROOF OF INCOME AND IDENTIFICATION Please attach the following to upon making application:

11 Copies of last two (2) most recent paycheck stubs.

12 Copy of last year's income tax return

13 Copies of last three (3) months bank statements

14 Proof of Other Income (SIIS, child support, etc.)

15 Copy of driver's license, military ID or state ID

16 Other _____

17 Other _____

18 Other _____

19 Other _____

20
21 WHEN YOUR APPLICATION IS COMPLETE Please submit Rental Application, processing fees, credit criteria, proof of
22 income and identification to fountainrealty@hotmail.com or 1437 C Street, Sparks.

23 Incomplete Rental Applications will not be processed.

24
25 Additional Information Requested: _____

26 _____

27 _____

28 _____

29 _____

30
31 Please allow three days to process applications. For questions or concerns regarding the Rental Application please contact
32 the Agent below.

33
34 Management Company Fountain Realty Managing Agent Tom L. Fountain

35
36 Address 1437 C Street Contact Phone: 775 825 8844

37
38 City, State, Zip: Sparks, Nevada 89431 Email Address: fountainrealty@hotmail.com



APPLICANT



1 Application will not be accepted if received without being initialed and signed by applicant. Please use additional applications if more than two persons are applying.

3
4 Applicant hereby makes this request to rent the following property under the following terms and conditions:

5
6 Requested Move In Date: _____
7 Property Address _____ City _____ State _____ Zip _____
8 (Non-Refundable) Application Fee \$ _____ Rent \$ _____ Security Deposit \$ _____
9 (Non-Refundable) Processing Fee \$ _____ Key Fee \$ _____ Pet Deposit \$ _____
10 Cleaning Fee \$ _____ Other \$ _____
11 Evidenced by: Cash Check Cashiers Check Money Order

12
13 Applicant Name _____ Birth Date _____
14 Social Security Number _____ Drivers License _____ State _____
15 Home Phone _____ Cell Phone _____
16 Work Phone _____ Email _____

17
18 Current Address: _____ City _____ State _____ Zip _____
19 Owned Rent Payment \$ _____ How Long? _____
20 Landlord Name/Mortgage Holder _____ Phone _____

21 Reason for leaving: _____
22 *If less than 3 Years*
23 Prior Address _____ City _____ State _____ Zip _____
24 Owned Rent Payment \$ _____ How Long? _____
25 Landlord Name/Mortgage Holder _____ Phone _____

26 Reason for leaving _____
27
28 Current Employer _____ Employed as _____ How Long? _____
29 Address _____ City _____ State _____ Zip _____
30 Phone _____ Fax _____
31 Salary \$ _____ Per/Mo _____ Supervisor _____
32 Other Income Source _____ Amount \$ _____

33 *If less than 3 Years*
34 Prior Employer _____ Employed as _____ How Long? _____
35 Address _____ City _____ State _____ Zip _____
36 Phone _____ Fax _____
37 Salary \$ _____ Per/Mo _____ Supervisor _____

38
39 Monthly Obligations Total \$ _____
40 Auto Loan \$ _____ Auto Insurance \$ _____
41 Health Insurance \$ _____ Child Support \$ _____
42 Credit Card \$ _____ Credit Card \$ _____
43 Other \$ _____ Other \$ _____

44
45 How long will Applicant live here? _____ Does anyone in the household smoke? Yes No

46
47 Applicant Emergency Contact Name _____ Relationship _____
48 Cell Phone _____ Work Phone _____ Other Phone _____
49 Address _____



CO-APPLICANT



1 Co-Applicant Name _____ Birth Date: _____
 2 Social Security Number _____ Drivers License _____ State _____
 3 Home Phone _____ Cell Phone _____
 4 Work Phone _____ Email _____
 5 _____
 6 Current Address _____ City _____ State _____ Zip _____
 7 Owned Rent Payment \$ _____ How Long? _____
 8 Landlord Name/Mortgage Holder _____ Phone _____
 9 Reason for leaving _____
 10 *If less than 3 Years*
 11 Prior Address _____ City _____ State _____ Zip _____
 12 Owned Rent Payment \$ _____ How Long? _____
 13 Landlord Name/Mortgage Holder _____ Phone _____
 14 Reason for leaving _____
 15 _____
 16 Current Employer _____ Employed as _____ How Long? _____
 17 Address _____ City _____ State _____ Zip _____
 18 Phone _____ Fax _____
 19 Salary \$ _____ Per/Mo _____ Supervisor _____
 20 Other Income Source _____ Amount \$ _____
 21 *If less than 3 Years*
 22 Prior Employer _____ Employed as _____ How Long? _____
 23 Address _____ City _____ State _____ Zip _____
 24 Phone _____ Fax _____
 25 Salary \$ _____ Per/Mo _____ Supervisor _____
 26 _____
 27 Monthly Obligations \$ _____
 28 Auto Loan \$ _____ Auto Insurance \$ _____
 29 Health Insurance \$ _____ Child Support \$ _____
 30 Credit Card \$ _____ Credit Card \$ _____
 31 Other \$ _____ Other \$ _____
 32 _____
 33 Co-Applicant Emergency Contact Name _____ Relationship: _____
 34 Cell Phone _____ Work Phone _____ Other Phone _____
 35 Address _____



GENERAL QUESTIONNAIRE



- 1 How did you hear about this property? _____
- 2 Please explain why you are moving from your current location? _____
- 3 _____
- 4 Has any Applicant ever had recurring problems with current apartment or landlord? Yes No If yes, please
- 5 explain: _____
- 6 _____
- 7 Has any Applicant ever been served a late rent notice? Yes No If yes, please explain: _____
- 8 _____
- 9 Has any Applicant ever willfully refused to pay rent when due? Yes No If yes, please explain: _____
- 10 _____
- 11 Has any Applicant ever been evicted? Yes No If yes, please explain: _____
- 12 _____
- 13 Has any Applicant ever filed bankruptcy? Yes No If yes, please explain: _____
- 14 _____
- 15 Has any Applicant been a party to a lawsuit? Yes No If yes, please explain: _____
- 16 _____
- 17 Has any applicant or occupant ever been convicted of a gross misdemeanor or felony? Yes No If yes, please
- 18 explain: _____
- 19 _____
- 20 Is any applicant or occupant required to register or has been convicted as a sex offender? Yes No If yes, please
- 21 explain: _____
- 22 We may run a credit check and a criminal background check. Is there anything negative we will find that you want to
- 23 comment on? _____
- 24 _____
- 25 _____
- 26 Does any Applicant plan to use liquid filled furniture? Yes No Furniture type _____
- 27 _____
- 28 Do you have Pets? Yes No If Yes, type of pet: _____
- 29 _____
- 30 Contact Agent for Pet Application.
- 31 _____
- 32 In addition to Applicant(s), other persons to be at premises:
- | | | | |
|----------------|-----------|--------------------|------------------|
| 33 Name: _____ | Age _____ | Relationship _____ | Occupation _____ |
| 34 Name: _____ | Age _____ | Relationship _____ | Occupation _____ |
| 35 Name: _____ | Age _____ | Relationship _____ | Occupation _____ |
| 36 Name: _____ | Age _____ | Relationship _____ | Occupation _____ |
- 37 _____
- 38 Vehicles
- | | | | | |
|---------------|-------------|-------------|-----------------|-------------|
| 39 Make _____ | Model _____ | Color _____ | License # _____ | State _____ |
| 40 Make _____ | Model _____ | Color _____ | License # _____ | State _____ |
| 41 Make _____ | Model _____ | Color _____ | License # _____ | State _____ |
| 42 Make _____ | Model _____ | Color _____ | License # _____ | State _____ |



VERIFICATION OF EMPLOYMENT



1 EMPLOYER CONTACT INFORMATION

2 Applicant Name: _____

3 Company Name: _____

Address: _____

4 Supervisor: _____

Phone Number: _____

5 Email: _____

Fax Number: _____

6

7

8

9

10

11

To Whom it May Concern:

One of your employees (named above) has applied to rent one of our properties. Please verify the following information below. See authorization attached.

13

14

15

Date of Employment

16

Hired Date: _____ Termination Date: _____

17

Employee is paid: Hourly \$ _____ Salary \$ _____

18

Frequency: Weekly Bi-Weekly Monthly

19

20

Supervisor Signature: _____ Date: _____

21

22

23

24

25

26

Please return complete form to:

27

Management Company: Fountain Realty Managing Agent Tom L. Fountain

28

Phone: 775 825 8844 Fax : 775 359 8844

29

Address : 1437 C Street City State Zip: Sparks, Nevada 89431

30

Email: fountainrealty@hotmail.com

31



RENTAL HISTORY VERIFICATION



1 Applicant Name: _____
 2 Name of Landlord/Property Manager: _____
 3 Previous/Current Rental Address: _____
 4 Management Phone Number: _____
 5 Management Fax Number: _____

6
7
8
9
10
11

To Whom it May Concern:

One of your tenants (named above) has applied to rent one of our properties. Please verify the following information below. See authorization attached.

Tenant Occupied the above property from _____ to _____

Any late rent payments? No Yes If yes, how many? _____

Any NSF? No Yes If yes, how many? _____

Deposit refunded? No Yes Comments: _____

Was proper notice to vacate given? No Yes Comments: _____

Condition property left in: Excellent Good Fair Poor Comments: _____

Did the tenant have any pets? No Yes What kind? _____

Would you rent to the Tenant again? No Yes

Other comments: _____

Landlord/Manager Signature: _____ Date: _____

Please return complete form to:

Management Company: Fountain Realty Managing Agent Tom L. Foutain

Phone: 775 825 8844 Fax : 775 359 8844

Address : 1437 C Street City State Zip: Sparks, Nevada 89431

Email: fountainrealty@hotmail.com



APPLICANT AGREEMENT AND AUTHORIZATION



- 1 A. Applicant declares that the information provided is true and accurate. Applicant authorizes verification of
- 2 employment, criminal records, credit, verification of references and current and previous landlords.
- 3 B. Applicant understands and acknowledges, that a false statement made on this application are grounds for denial
- 4 of rental to Applicant. Any statement on this application may be construed as a condition precedent to any
- 5 binding rental agreement or contract between Applicant and landlord.
- 6 C. Applicant hereby releases landlord, agent and this company from any and all damages or liabilities which might
- 7 result from the above information. Applicant releases present landlord and all previous landlords from liability
- 8 for any damage or injury caused by providing information to landlord or agent regarding Applicant.
- 9 D. Landlord and agent will not be bound by any representations, agreements or promises, written or oral, made by
- 10 landlord or agent unless contained in the Rental Agreement signed by landlord or landlord's agent.
- 11 E Applicant understands that Applicant acquires no rights to premises until execution of a Rental Agreement and
- 12 deposit of rent and security deposit.
- 13 F. Applicant understand that _____ is the leasing agent and representative for
- 14 the landlord of the premises located at _____.
- 15 G. Applicant agrees to execute a Rental Agreement within _____ business days after being notified of acceptance
- 16 of this Applicant.

17
18 I understand that any discrepancy or lack of information may result in the rejection of this application and that this is
19 an application for an apartment/home and does not constitute a rental or lease agreement in whole or part.

20
21 APPLICANT _____ DATE _____

22 CO-APPLICANT _____ DATE _____

23 CO-APPLICANT _____ DATE _____

24 CO-APPLICANT _____ DATE _____



APPLICATION FOR PET APPROVAL



1 This is an application between _____ (TENANT)
 2 and **Fountain Realty** _____ (MANAGING AGENT) to have a pet
 3 at the Property located at
 4 _____
 5 _____

6 Tenant requests approval to keep the pet(s) described below at the Property.

7
 8 Number of Dogs _____ Cats _____ Other _____

9 If "Other" please explain _____
 10 _____

Pet Identification	Name	Age	Breed	Weight	Spayed/Neutered	License #
13 <input type="checkbox"/> Cat <input type="checkbox"/> Dog <input type="checkbox"/> Male <input type="checkbox"/> Female	_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
14 <input type="checkbox"/> Cat <input type="checkbox"/> Dog <input type="checkbox"/> Male <input type="checkbox"/> Female	_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
15 <input type="checkbox"/> Cat <input type="checkbox"/> Dog <input type="checkbox"/> Male <input type="checkbox"/> Female	_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
16 <input type="checkbox"/> Cat <input type="checkbox"/> Dog <input type="checkbox"/> Male <input type="checkbox"/> Female	_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

17
 18 Tenant certifies pet(s) are in good health. Tenant to provide the following documentation to Management:

19 A certificate of health/vaccination from a licensed veterinarian.

20 A photo of each pet.

21
 22 Has there ever been complaint(s) filed against your pet by any authority for excessive barking, biting and/or
 23 aggressive behavior? No Yes If yes, please explain: _____
 24 _____

- 25
 26 1. Tenant agrees to keep pets on a leash when not in a fenced backyard.
 27 2. Tenant agrees to clean up all waste on the Property as well as in any common areas on a regular basis.
 28 3. Tenant agrees to abide by all rules, regulations and CC&R's with respect to pet ownership if Property is
 29 located in a Common Interest Community.
 30 4. Tenant acknowledges and understand that the representations herein are considered to be material provisions
 31 of the Residential Lease Agreement.

32
 33 Dated _____

34 Tenant _____

35 Tenant _____

36 Tenant _____

38 Tenant _____

39
 40 **Response**

41 Managing Agent, having reviewed this Application of Pet Approval submitted by Tenant(s),

42 approves Tenants Application.

43 OR

44 rejects Tenants Application.

45 Managing Agent: _____ Dated: _____

Fountain Realty