

CENTURION PROPERTY MANAGEMENT

Property Address: _____

ITEMS NEEDED FOR RENTING A HOUSE

Please be sure to fill out this application completely. Missing information will cause a processing delay! Anyone that is 18 years or older must fill out an application, NO EXCEPTIONS.

At Time of Application

- _____ \$75.00 Application Fee (NON-REFUNDABLE) per each adult over 18 in certified funds*
- _____ Application
- _____ Pet Application with Color Photo (If Applicable)
- _____ Authorization for Landlord Verification
- _____ Property Disclosure
- _____ 2 Pay Stubs (bi-weekly) and/or 3 Months Bank Statements (MUST be current)
- _____ Copies of government or state-issued ID'S of everyone over the age of 18
- _____ Showing Agent: Duties Owed or Referral Form and W-9 PID# _____

After Approval (Funds Must be Paid within 24hrs of Approval)

- _____ Security Deposit
- _____ \$ _____ Security Deposit (Equal to 1 -2 month's rent based on credit/rental history)
- _____ \$300 Pet Deposit per Pet (If applicable)
- _____ \$100 Key Deposit

At the Time of Lease Signing

- _____ 1st Month's
- _____ \$100 Admin Processing Fee
- _____ \$350 Cleaning Fee

***All Rents and Deposits are to be paid in separate certified (cashier's check, certified check or money order – NO CASH) funds**

APPLICANT INITIALS (____)(____)



RENTAL APPLICATION



Application is not complete until page 6 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 \$ <u>75.00 EA</u>
Holding Fee \$ <u>0.00</u>
Amt. Received \$ _____

PROPERTY ADDRESS _____

MOVE-IN DATE _____

OTHER AGENT INFORMATION

REFERRAL COMPANY _____ MLS # _____

AGENT: _____ P.I.D# _____

IS THE AGENT REPRESENTING THE APPLICANT? YES _____ -OR- NO _____ IF "NO," A Brokerage Referral Agreement _____ IS ATTACHED to this Rental Application, or _____ the showing Licensee WILL _____ -OR- WILL NOT _____ produce and deliver/email a Brokerage Referral Agreement to the Listing Brokerage's Office (as shown on the MLS listing) within _____ calendar days [FIVE (5) calendar days maximum].

Other: _____

RENT/DEPOSITS AND OTHER FEES

(NON-REFUNDABLE) APPLICATION FEE \$ 75.00 EA (NON-REFUNDABLE) PROCESSING FEE \$ _____

RENT \$ _____ SECURITY DEPOSIT \$ _____ OTHER DEPOSITS \$ _____

PET DEPOSIT \$ _____ (NON-REFUNDABLE) PET FEE \$ _____

KEY FEE \$ 100.00 CLEANING FEE \$ 350.00 OTHER \$ 100.00 HOLDING FEE \$ _____

EVIDENCED BY: CASH _____ CHECK _____ CASHIER'S CHECK MONEY ORDER

APPLICANT INFORMATION

APPLICANT: _____

HOME PHONE # _____ OTHER PHONE _____

EMAIL _____ SSN# _____

DL# _____ STATE _____ BIRTH DATE _____

CURRENT ADDRESS: _____

CITY, STATE, ZIP _____

LANDLORD NAME / MORTGAGE HOLDER: _____ PAYMENT: _____

PHONE # _____ FAX # _____ EMAIL ADDRESS: _____

HOW LONG? _____ (PLEASE CIRCLE ONE) ___ OWNED OR ___ RENT

REASON FOR LEAVING _____

PRIOR STREET ADDRESS: _____

CITY, STATE, ZIP _____

LANDLORD NAME / MORTGAGE HOLDER: _____ PAYMENT: _____

PHONE # _____ FAX # _____ EMAIL ADDRESS: _____

HOW LONG? _____ (PLEASE CHECK ONE) ___ OWNED OR ___ RENT

REASON FOR LEAVING _____

CURRENT EMPLOYER: _____

HOW LONG? _____ EMPLOYED AS _____

ADDRESS: _____

CITY, STATE, ZIP _____

PHONE # _____ FAX# _____

SALARY: \$ _____ PER/MO SUPERVISOR: _____

OTHER INCOME: SOURCE _____ AMOUNT: \$ _____

PRIOR EMPLOYER (IF LESS THAN 3 YEARS): _____ PHONE # _____

HOW LONG? _____ EMPLOYED AS _____

SALARY: \$ _____ PER/MO SUPERVISOR: _____

CREDIT REFERENCES: BANK _____ ACCT. # _____

ADDRESS _____

PERSONAL REFERENCES:

1. NAME _____ PHONE # _____

EMAIL _____ RELATIONSHIP _____

2. NAME _____ PHONE # _____

EMAIL _____ RELATIONSHIP _____

CO-APPLICANT INFORMATION

CO-APPLICANT: _____

HOME PHONE # _____ OTHER PHONE _____

EMAIL _____ SSN# _____

DL# _____ STATE _____ BIRTH DATE _____

CURRENT ADDRESS: _____

CITY, STATE, ZIP _____

LANDLORD NAME / MORTGAGE HOLDER: _____ PAYMENT: _____

PHONE # _____ FAX # _____ EMAIL ADDRESS: _____

HOW LONG? _____ (PLEASE CIRCLE ONE) _____ OWNED OR _____ RENT

REASON FOR LEAVING _____

PRIOR STREET ADDRESS: _____

CITY, STATE, ZIP _____

LANDLORD NAME / MORTGAGE HOLDER: _____ PAYMENT: _____

PHONE # _____ FAX # _____ EMAIL ADDRESS: _____

HOW LONG? _____ (PLEASE CIRCLE ONE) _____ OWNED OR _____ RENT

REASON FOR LEAVING _____

CURRENT EMPLOYER: _____

HOW LONG? _____ EMPLOYED AS _____

ADDRESS: _____

CITY, STATE, ZIP _____

PHONE # _____ FAX# _____

SALARY: \$ _____ PER/MO SUPERVISOR: _____

OTHER INCOME: SOURCE _____ AMOUNT: \$ _____

PRIOR EMPLOYER (IF LESS THAN 3 YEARS): _____ PHONE # _____

HOW LONG? _____ EMPLOYED AS _____

SALARY: \$ _____ PER/MO SUPERVISOR: _____

CREDIT REFERENCES: BANK _____ ACCT. # _____

ADDRESS _____

PERSONAL REFERENCES:-

1. NAME _____ PHONE # _____

EMAIL _____ RELATIONSHIP _____

2. NAME _____ PHONE # _____

EMAIL _____ RELATIONSHIP _____

VEHICLE INFORMATION

AUTOMOBILES:

MAKE _____ MODEL _____ LIC# _____ STATE _____ YR _____ COLOR _____

MAKE _____ MODEL _____ LIC# _____ STATE _____ YR _____ COLOR _____

MAKE _____ MODEL _____ LIC# _____ STATE _____ YR _____ COLOR _____

OTHER OCCUPANTS

IN ADDITION TO APPLICANT(S), OTHER PERSONS TO BE AT PREMISES:

NAME	RELATIONSHIP	AGE	OCCUPATION	TELEPHONE NUMBER
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

PETS

PETS? (Y/N) _____ HOW MANY? Cats _____ Dogs _____ Other _____

Breed: _____

IF YES, PLEASE COMPLETE THE PET APPLICATION AND SUBMIT IT WITH THE RENTAL APPLICATION.

OTHER INFORMATION

HAS ANY APPLICANT EVER FILED BANKRUPTCY? _____ GIVE DETAILS _____

HAS ANY APPLICANT EVER BEEN EVICTED? _____ EXPLAIN _____

HAS ANY APPLICANT EVER WILLFULLY REFUSED TO PAY RENT WHEN DUE? _____ EXPLAIN _____

HOW LONG DOES APPLICANT PLAN TO LIVE HERE? _____

DOES APPLICANT PLAN TO USE LIQUID FILLED FURNITURE? _____ TYPE _____

DOES ANYONE IN THE HOUSEHOLD SMOKE? Y/N _____

EMERGENCY CONTACT

APPLICANT IN CASE OF EMERGENCY, PERSON TO NOTIFY: _____

RELATIONSHIP: _____ *PHONE #* _____

CO-APPLICANT IN CASE OF EMERGENCY, PERSON TO NOTIFY: _____

RELATIONSHIP: _____ *PHONE #* _____

Applicants Initials [_____] [_____]

DISCLOSURE

PLEASE READ CAREFULLY BEFORE SIGNING

1. APPLICANT UNDERSTANDS THAT CENTURION MANAGEMENT IS THE LEASING AGENT AND REPRESENTATIVE FOR THE LANDLORD OF THE PREMISES LOCATED AT _____ AT A MONTHLY RENT OF \$ _____.
2. APPLICANT DECLARES THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT, AND APPLICANT AUTHORIZES AN EMPLOYMENT CHECK, CRIMINAL RECORDS CHECK, CREDIT CHECK, VERIFICATION OF REFERENCES AND CURRENT AND PREVIOUS LANDLORDS.
3. APPLICANT HEREBY PAYS \$ 75.00 EA AS A NON-REFUNDABLE APPLICATION FEE AND \$ 0.00 AS HOLDING FEE. IF APPLICANT IS DECLINED, THE HOLDING FEE WILL BE REFUNDED WITHIN N/A BUSINESS DAYS. IF, AFTER APPROVAL, APPLICANT DECIDES NOT TO FULFILL THIS AGREEMENT BY COMPLETING LEASE AGREEMENT AND PAYING SECURITY DEPOSIT, HOLDING FEE SHALL BE FORFEITED BY APPLICANT PURSUANT TO THE TERMS OF THE HOLDING FEE AGREEMENT.
4. APPLICANT AGREES TO EXECUTE A LEASE AGREEMENT BEFORE POSSESSION IS GIVEN AND TO PAY THE RENT AND SECURITY DEPOSIT WITHIN 1-2 BUSINESS DAYS AFTER BEING NOTIFIED OF ACCEPTANCE OF THIS APPLICANT.
5. LANDLORD AND AGENT WILL NOT BE BOUND BY ANY REPRESENTATIONS, AGREEMENTS OR PROMISES, WRITTEN OR ORAL, MADE BY LANDLORD OR AGENT UNLESS CONTAINED IN THE LEASE AGREEMENT SIGNED BY LANDLORD OR LANDLORD'S AGENT.
6. APPLICANT HAS REVIEWED THE PUBLIC RECORD INFORMATION ON THE CLARK COUNTY RECORDER'S WEBSITE SHOWING THE POSSIBILITY OF PAST OR CURRENT LIENS RECORDED AGAINST THE PROPERTY AS OF THE DATE OF THIS APPLICATION. APPLICANT AGREES TO LEASE THE PROPERTY SUBJECT TO THIS INFORMATION, AND HOLD THE LANDLORD AND ITS AGENTS HARMLESS BASED UPON THIS INFORMATION AND FUTURE USE OF THE PROPERTY.
7. APPLICANT DOES HEREBY RELEASE LANDLORD, AGENT AND THIS COMPANY FROM ANY AND ALL DAMAGES OR LIABILITIES WHICH MIGHT RESULT FROM THE ABOVE INFORMATION. APPLICANT RELEASES PRESENT LANDLORD AND ALL PREVIOUS LANDLORDS FROM ANY AND ALL LIABILITY FOR ANY DAMAGE OR INJURY WHATSOEVER CAUSED BY PROVIDING INFORMATION TO LANDLORD OR AGENT REGARDING APPLICANT.
8. APPLICANT UNDERSTANDS AND ACKNOWLEDGES THAT A FALSE STATEMENT MADE HEREIN IS GROUNDS FOR DENIAL OF RENTAL TO APPLICANT. ANY STATEMENT HEREIN MAY BE CONSTRUED AS A CONDITION PRECEDENT TO ANY BINDING LEASE AGREEMENT OR CONTRACT BETWEEN APPLICANT AND LANDLORD.
9. APPROVAL FOR RESIDENCY IS MADE WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, GENDER IDENTITY OR EXPRESSION, FAMILIAL STATUS, SEXUAL ORIENTATION, ANCESTRY, OR HANDICAP.
10. APPLICANT UNDERSTANDS THAT APPLICANT ACQUIRES NO RIGHTS TO PREMISES UNTIL EXECUTION OF A LEASE AGREEMENT IN THE FORM SUBMITTED AND DEPOSIT OF RENT AND SECURITY DESCRIBED ABOVE.

SIGNATURE OF APPLICANT *DATE* _____ *TIME* _____

PRINT NAME

SIGNATURE OF CO-APPLICANT *DATE* _____ *TIME* _____

PRINT NAME

THE GREATER LAS VEGAS ASSOCIATION OF REALTORS® PROVIDES THIS FORM FOR MEMBERS ONLY AND IS IN NO WAY DEEMED RESPONSIBLE FOR INFORMATION PROVIDED HEREIN.



APPLICATION FOR PET APPROVAL



This is an application to the Landlord/Owner by TENANT's Name: _____
 TENANT's Name: _____ TENANT's Name: _____
 TENANT's Name: _____ ("Tenant") to have a pet at the following address:
 _____ ("the Premises").

1. The pet or pets are identified as follows:

Name	Age	Breed	Weight	Gender	Neutered?	License No.
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

2. Tenant 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. Tenant will keep pets on a leash when not in a fenced backyard area and will clean up all waste on the Premises as well as in any common areas.

4. If the Premises is subject to a Common Interest Community, Tenant will abide by all rules and regulations and CC&R's with respect to pet ownership.

5. Tenant acknowledges and understands that the representations herein are considered to be material provisions of the Residential Lease Agreement.

6. Tenant requests Landlord's approval to keep the above-name pet(s) in and/or on the Premises.

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. Tenant 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 Premises.

Tenant agrees to the above terms and conditions.

_____ TENANT'S SIGNATURE	_____ DATE	_____ TENANT'S SIGNATURE	_____ DATE
_____ PRINT NAME		_____ PRINT NAME	

_____ TENANT'S SIGNATURE	_____ DATE	_____ TENANT'S SIGNATURE	_____ DATE
_____ PRINT NAME		_____ PRINT NAME	

LANDLORD'S RESPONSE

Landlord having considered the Application for Pet Approval submitted by Tenant, does hereby
 _____ approve **-OR-** _____ reject Tenant's application.

_____ LANDLORD/OWNER	_____ DATE	_____ LANDLORD/OWNER	_____ DATE
_____ PRINT NAME		_____ PRINT NAME	

CENTURION PROPERTY MANAGEMENT

Authorization for Landlord Verification

I, hereby give my authorization for Centurion Management Services to do a rental verification of my current place of residence.

Name: _____

Address: _____

Phone #: _____ Cell#: _____

Email: _____

Client Signature

Date

Client Signature

Date

CENTURION PROPERTY MANAGEMENT

****AUTHORIZATION**** **PLEASE READ CAREFULLY**

Your signature on this form indicates that you have read, understand and agree to the terms outlines herein. If you do not understand, please seek legal advice prior to paying the application fee and your Security Deposit(s). Centurion Management Services will be referred to as "CMS" here in this document.

The \$75 per adult application fee is NON REFUNDABLE, and is payable by money order or cashier check at the time you submit your application to lease the property at _____
_____. CMS will run a credit report for each adult (18 years of age and older) planning to reside at the property. We will also contact your employer(s) and your current and previous landlord(s) to verify the information you have provided. **It is important that the information on this application be accurate and complete.** By signing, you represent and warrant its accuracy and authorize CMS to verify your references, rental history and employment.

When your application is approved, a Security Deposit is due and payable by cashier check or money order within 24 hours of approval. All move-in funds must be certified and made payable to Centurion Management Services. We will take the property off the rental market once the application is approved and the deposit is paid. **The property will be held for a maximum of fourteen (14) days before the rent starts, from the date the Security Deposit is received.**

Applicant(s) understand that all rental properties are 'as-is' condition upon move-in.

If you choose not to take possession of the property, for whatever reason, the Security Deposit will NOT be automatically refunded. CMS will apply the Security Deposit toward rent for the time the property was held off the market, re-renting the property along with a \$250 administrative fee. If you are unable to move into the property due to it being uninhabitable (because of flood, fire, earthquake, etc. or other unforeseen catastrophe) the Security Deposit is fully refundable.

AGENCY DISCLOSURE: CMS is working for the property owner under a separate leasing/management agreement. As agent for the owner, we have an obligation of trust and loyalty to work toward the OWNER'S best interests. As REAL ESTATE AGENTS, we strive to treat you and all parties to this transaction honestly and fairly.

I HAVE READ AND UNDERSTAND:

Applicant	Date
Co-Applicant	Date
Co-Applicant	Date