

POHLIG BOX FACTORY, LLC

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Pohlig Box Factory Apartments, LLC does business in accordance with the Fair Housing Amendments Act of 1988 and the Virginia Fair Housing Law, which specifies that it is illegal to discriminate against any person in residential real estate transactions because of race, color, sex, religion, physical or mental handicap, familial status, age or national origin. All lease signers must be at least 18 years of age or older.

RESERVATION FEE

A reservation fee of \$500.00 is required in order to reserve an apartment. \$150 is the application/administration fee and \$350 will go towards your security deposit (which is \$500). The \$150 fee is non-refundable in the event of a cancellation by the applicant. Upon move in you will be required to pay the remaining \$150 of the Security Deposit. You may pay this amount by MONEY ORDER or CHECK. Cash is not accepted. Currently, your reservation fee will hold your apartment for up to thirty (30) days.

SECURITY DEPOSIT

A security deposit, of \$500 is required before residency. Upon disapproval, any security deposit you have paid will be refunded. If your application is approved, the Security Deposit will be held until you vacate the premises. At that time, your Security Deposit, in addition with any interest due will be refunded in compliance with the terms of your lease and applicable Virginia Statutes.

PETS

We allow **CATS ONLY**. Resident shall pay a sum of \$300.00 that is a non-refundable pet fee. We do not charge a monthly pet fee. Additional fees may be incurred in the event of damage to property, or for cleaning and extermination.

QUALIFICATION RESTRICTIONS

Applicants for rental of a dwelling unit are subject to approval as follows:

Income: The total gross monthly income(s) of the applicant(s) must be equal or exceed an amount equal to 3 times the rental for that particular dwelling unit. Co-applicant's are accepted; however the gross monthly income of the co-applicant must equal or exceed five (5) times the rental for that particular dwelling.

Credit: CREDIT INFORMATION ON EACH APPLICANT WILL BE OBTAINED THROUGH A NATIONAL CREDIT-REPORTING AGENCY. CREDIT HISTORY SHOULD POSIT IVELY REFLECT THE APPLICANT 'S ABILITY AND WILLINGNESS TO MAKE PAYMENTS AS REQUIRED BY THE LEASE.

Rental Record: A satisfactory reference from previous landlord, i.e., compliance with the requirements of the lease as to payment of rent and observance of other obligations of the tenant specified therein.

Smoking: Pohlig Box Factory is a smoke free building.

LEASE, RULES AND REGULATIONS

All applicants must sign a lease and related rules and regulations before occupancy. We expect full compliance with these documents by all residents. Copies of these may be obtained from the rental staff for your preview.

SIGNATURE OF APPLICANT

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RENTAL APPLICATION

DATE OF APPLICATION _____ APT SIZE DESIRED _____ DATE DESIRED _____
APPLICATION FEE REQUIRED _____ RENT AMOUNT \$ _____ UNIT ADDRESS _____

LEASE TERM DESIRED: 12 MONTH

A FEE OF \$ _____ IS ACCEPTED AS A RESERVATION DEPOSIT. THIS DEPOSIT CAN BE RETURNED TO YOU ONLY IF THE APPLICATION IS NOT APPROVED. UPON APPROVAL AND A SIGNED LEASE, THIS RESERVATION FEE SHALL BECOME A PORTION OF THE SECURITY DEPOSIT REQUIRED BY THE LEASE.

As provided by the Government Data Collection and Dissemination Practices Act, anyone who is requested to provide personal information about him/herself must be informed whether he/she is legally required to provide such information, or whether he/she may refuse to supply the information requested.

Although you are not legally required to provide the information requested your failure to do so will result in our inability to determine your eligibility for housing in our development.

It is possible that information provided by you will be revealed to others for the purpose of confirmation or for other purposes in accordance with the Virginia Freedom of Information Act, but any information so supplied is subject to the safeguards of the Virginia Privacy Protection Act.

NAMES

(1) _____
LAST FIRST MIDDLE DATE OF BIRTH SOCIAL SECURITY NO.

CURRENT ADDRESS

NUMBER & STREET NAME CITY STATE ZIP HOW LONG?
NAME OF APTS OR RENTAL AGENT TELEPHONE \$ RENT RATE

PREVIOUS ADDRESS (IF CURRENT ADDRESS IS LESS THAN ONE YEAR)

NUMBER & STREET NAME CITY STATE ZIP HOW LONG?
NAME OF APTS OR RENTAL AGENT TELEPHONE \$ RENT RATE

EMPLOYMENT

(1) _____
CURRENT EMPLOYER HOW LONG? TELEPHONE

BUSINESS ADDRESS CITY STATE ZIP
YOUR POSITION \$ SALARY PER
ADDITIONAL SOURCE OF INCOME \$ AMOUNT PER

FINANCIAL INFORMATION

FINANCIAL INSTUTION BALANCE

AUTOMOBILE

MAKE YEAR COLOR PLATE # DESCRIPTION

DO YOU OWN ANY RECREATIONAL VEHICLES? IF SO, PLEASE DESCRIBE

EMERGENCY CONTACT

WHOM MAY WE CONTACT IN CASE OF PERSONAL EMERGENCY (SOMEONE NOT LIVING WITH YOU)

LAST FIRST MIDDLE INITIAL RELATIONSHIP

NUMBER & STREET NAME CITY STATE ZIP

HOME PHONE NUMBER WORK PHONE NUMBER

ARE YOU A PET OWNER? NO YES IF SO, WHAT KIND _____ WEIGHT _____ AGE _____

CANCELLATION POLICY

Cancellation must be provided in writing prior to applicant receiving deposit. Applicant(s) has 48 hours to cancel application following notification of approval for an apartment.

ALL RESERVATION/APPLICATION FEES ARE NON-REFUNDABLE

RESIDENT STATEMENT

I/We understand that the above information is being collected to determine my/our eligibility for residency. I/we authorize the owner/management to verify all necessary information provided on this application, and my/our signature is consent to obtain such verifications. **I/WE FURTHER CERTIFY THAT THE FOREGOING INFORMATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.**

“I hereby authorize Pohlig Box Factory LLC to obtain a consumer report, and any other information it deems necessary, for the purpose of evaluating my rental application. I understand that such information may include, but is not limited to, credit history, civil and criminal information, records of arrest, rental history, employment/salary details, vehicle records, licensing records, and/or any other necessary information. **I hereby expressly release Pohlig Box Factory LLC, and any procurer or furnisher of information, from any liability what-so-ever in the use, procurement, or furnishing of such information, and understand that my application information may be provided to various local, state and/or federal government agencies, including without limitation, various law enforcement agencies.**”

SIGNATURE OF ALL ADULTS TO APPEAR ON LEASE

SIGNATURE OF APPLICANT SIGNATURE OF APPLICANT

DAYTIME CONTACT NUMBER DAYTIME CONTACT NUMBER

EMAIL ADDRESS EMAIL ADDRESS