



205 Wallace Lane, Fredericksburg, VA 22408 | **Office:** 540-847-5592

## APPLICATION INSTRUCTIONS

**THIS PACKET IS NOT AN APPLICATION. THESE ARE MANDATORY FORMS THAT ARE REQUIRED TO BE COMPLETED & SUBMITTED VIA EMAIL PRIOR TO, AFTER, OR WHILE SUBMITTING THE ONLINE APPLICATION.**

Thank you for considering our property! Below are instructions for completing the application. It is important that all instructions are read in this packet and on the application. It is also important that the following forms and the online application are completed in full, the security deposit is submitted to our office in the form of a **money order or cashier's check made payable to Wise Management or your legal name** and that your agent information is provided if applicable.

1. This packet must be completed and submitted to our office with the application fee. You may email this to [vwisecup67@gmail.com](mailto:vwisecup67@gmail.com) 2. Application fee is collected online. We will accept the application security deposit in the form of **money order or cashier's check only** . 3. **Both this packet and the online application must be submitted.** It is important that everything is filled out completely and honestly. Any omitted or false information will subject the application to possible immediate rejection or eviction from the property after you've entered into a signed rental agreement.

*Licensed in the Commonwealth of Virginia*

*Office Independently Owned and Operated*





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## AGENT INFORMATION

Subject Property: \_\_\_\_\_

Applicant Name(s): \_\_\_\_\_

Name: \_\_\_\_\_

Brokerage Name: \_\_\_\_\_

Number: \_\_\_\_\_

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## RENTAL APPLICATION CRITERIA

Applicant(s) please make sure the online application **and** this Verification Packet are completely filled out. **ALL individuals that will be living in the home that are over the age of 18 must complete an application whether they are contributing financially or not.** Each applicant is subject to a \$50.00 application fee which is non-refundable and must be paid online. Married couples only access one \$50.00 fee. **The security deposit is due immediately to be considered for any of our properties and payable to Wise Management or your legal name by cashiers check or money order.**

### ALL OF THE FOLLOWING ARE REQUIRED FOR SUBMITTING AN APPLICATION:

- Entire online application must be completed with all information requested. All employer and landlord information, including a fax number or email for each, will be required.
- All applicant(s) are subject to paying their security deposit at time of application which is required in **Cashiers Check or Money Order** made payable to WISE MANAGEMENT or your legal name. If the applicant is not accepted their security deposit equal to one month's rent will be returned immediately.
- \$50.00 Application fee is NON-refundable.
- All applicants **MUST** provide valid photo ID, driver's license, or another acceptable form of photo ID.
- Agents or applicants can email this Verification Packet to [vwisecup67@gmail.com](mailto:vwisecup67@gmail.com)
- Applicants are accepting the property in "AS IS" condition unless otherwise specified in the listing.

Please note; not all properties do not come with a washer and dryer. If there is one on the property, do not assume it conveys. Follow up with our office for verification.

- Must provide 2 most recent pay stubs for each applicant along with HR contact information. • If you are self employed you must provide 2 years (most recent) tax returns and/or W2's.
- Co-signers will be considered on a case by case basis with owner approval.
- Service Animal Assistance; Disability Verification form to be completed by tenant and by third party verifier (State of Virginal Medical Professional). This form is in the documents section of the MLS.

### RENTAL REQUIREMENTS:

- Evictions or a repeated history of Non-Sufficient Funds may be cause for denial.
- Rental history that shows an existing debt balance may be cause for denial.
- Rental verification of past damages to the home may be cause for denial.
- Credit reports that shows judgments, liens, and collections may be cause for denial.
- Applicants may be denied based on number and type of pets.

- Applicant has no leasehold interest until the lease is fully executed by both parties.

**PET POLICY:**

- All pets are considered on a case by case basis unless the listing states otherwise.
- Pets fees are \$500.00 per pet and are non-refundable
- Pet fees are not a deposit against any damages an animal does to an owner's property. Damages will be assessed upon move out and will be the full responsibility of the tenant.
  
- Please include with the application a current photo of each pet listed.

**CO-SIGNER/GUARANTEE:** All co-signers are required to fill out a separate online application along with application fee. All co-signers will be listed on the Lease.

The decision to accept or deny an applicant is based on the information received from the credit check and other verifications. The Landlord makes the decision for acceptance or denial based on the information from all reporting agencies.

**DO YOU HAVE A SERVICE or COMFORT ANIMAL? \_\_\_ YES \_\_\_ NO**

**DO YOU HAVE ANY SPECIAL NEEDS? \_\_\_ YES \_\_\_ NO**

**DO YOU NEED A VISUAL SMOKE DETECTOR? \_\_\_ YES \_\_\_ NO**

**DO YOU HAVE ANY RESPIRATORY ISSUES THAT MAY REQUIRE ATTENTION DURING THE LEASE PERIOD? \_\_\_ YES \_\_\_ NO**

**REQUESTED RENTAL RATE: \$ \_\_\_\_\_**

**REQUESTED LEASE TERM: \_\_\_\_\_**

**APPLICANT(S) HAVE READ AND UNDERSTAND ALL OF THE ABOVE**

**CRITERIA:**

\_\_\_\_\_ Applicant Signature/Date

\_\_\_\_\_ Applicant Signature/Date

\_\_\_\_\_ Applicant Signature/Date

\_\_\_\_\_ Applicant Signature/Date



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## CREDIT REPORT AUTHORIZATION

This shall constitute my/our personal authorization for **Wise Management, INC** to request credit history on me/us, including checking all public records.

I/we further authorize **Wise Management, INC** to disclose and discuss our credit with the following: **Listing/Selling Agent, Owner(s), Employers and/or Landlord.**

It is my/our wish and instructions that said company will use the consumer credit report for only this transaction and for no other transaction whatsoever.

### Applicant #1 Applicant #2

\_\_\_\_\_  
Authorizing Signature Authorizing Signature

\_\_\_\_\_  
Print Full Legal Name Print Full Legal Name

\_\_\_\_\_  
Present Legal Address Present Legal Address

\_\_\_\_\_  
Date Date



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**RENTAL VERIFICATION**

ALL INFORMATION IS REQUIRED TO BE FILLED IN OR APPLICATION PROCESSING WILL BE DELAYED UNTIL THE INFORMATION IS PROVIDED

Applicant(s) name(s): \_\_\_\_\_

Current address: \_\_\_\_\_

Name and Address of Current Landlord/Management Company: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

I/We authorize our current Landlord or Management Company to release the following information regarding our rental history at the above referenced address.

\_\_\_\_\_  
Applicant Signature Date

\_\_\_\_\_  
Applicant Signature Date

\*\*\*\*APPLICANT: DO NOT COMPLETE THE FOLLOWING\*\*\*\*

An application for residency has been made by the named applicant(s). We are requesting that you verify the name of the applicant(s) and provide related information in accordance with the authorization Secured Property Management has attained by the applicant(s). We will maintain this information as confidential. Thank you in advance for your assistance.

Dates of occupancy: From \_\_\_\_\_ To \_\_\_\_\_ Monthly

Rent: \$ \_\_\_\_\_

Paid as Agreed? \_\_\_\_\_ Yes \_\_\_\_\_ No If no, number of times late \_\_\_\_\_ Any Returned Checks:

\_\_\_\_\_ Yes \_\_\_\_\_ No If yes, number of times \_\_\_\_\_ Specify any legal action taken:

\_\_\_\_\_ Specify any complaints

regarding pets: \_\_\_\_\_

Was proper notice of termination given: \_\_\_\_\_

Condition of unit at termination: \_\_\_\_\_

Would you rent to applicant/s again: \_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_  
of Landlord or Property Manager Date Signature

Please return verification to Wise Management, INC via:

Email: [wisecup67@gmail.com](mailto:wisecup67@gmail.com)



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**EMPLOYMENT VERIFICATION**

ALL INFORMATION IS REQUIRED TO BE FILLED IN OR APPLICATION PROCESSING WILL BE DELAYED UNTIL THE INFORMATION IS PROVIDED

Applicant Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

Name and Address of Current Employer: \_\_\_\_\_

\_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

I authorize our current employer to release the following information regarding my employment history to **Wise Management, INC.**

\_\_\_\_\_  
Applicant Signature Date

**\*\*\*\*APPLICANT: DO NOT COMPLETE THE FOLLOWING\*\*\*\***

An application for residency has been made by the above named applicant. We are requesting that you verify the name of the applicant and provide related information in accordance with the authorization **Wise Management, INC** has attained by the applicant. This information will remain confidential. Thank you in advance for your assistance.

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_

Current Salary: \_\_\_\_\_

Full Time or Part Time: \_\_\_\_\_ Job Stability: \_\_\_\_\_

Any concerns in reference to named employee: \_\_\_\_\_

Name and title of person filling out this form: \_\_\_\_\_

Signature: \_\_\_\_\_

**Please return verification to Wise Management, INC via:**

**Email: vwisecup67@gmail.com**