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INNOVATIVE REAL ESTATE MANAGEMENT CO.

15510 OLIVE BLVD., SUITE 200
CHESTERFIELD, MO 63017-0710
(636) 530-7171 / FAX (636) 530-1686

RENTAL APPLICATION AND AGREEMENT

 EQUAL HOUSING OPPORTUNITY 

PROPERTY: _____
DATE OF APPLICATION: ____/____/____

APPLICANT INFORMATION

Applicant Name _____ Phone () - _____
 Applicant Address _____
 # STREET CITY STATE ZIP
 Social Security # _____ Birthdate ____/____/____
 Landlord _____ Landlord Phone () - _____
 How long at Present Address _____ years _____ months Monthly Rent \$ _____
 Reason for Vacating _____
 Applicant Present Employer _____ Occupation _____
 Employer Address _____ Phone: () - _____
 Net Monthly Income \$ _____ Length of Employment _____ Supervisor _____
 Bank Name: _____ Checking Account # _____ Savings _____
 Driver's License # _____ State _____
 Automobile (Year & Make) _____ License # _____

CO-APPLICANT INFORMATION

Co-Applicant Name _____ Phone () - _____
 Co-Applicant Address _____
 # STREET CITY STATE ZIP
 Social Security # _____ Birthdate ____/____/____
 Landlord _____ Landlord Phone () - _____
 How long at Present Address _____ years _____ months Monthly Rent \$ _____
 Reason for Vacating _____
 Applicant Present Employer _____ Occupation _____
 Employer Address _____ Phone: () - _____
 Net Monthly Income \$ _____ Length of Employment _____ Supervisor _____
 Bank Name: _____ Checking Account # _____ Savings _____
 Driver's License # _____ State _____
 Automobile (Year & Make) _____ License # _____

PETS

Pet #1 Type & Breed _____ Weight _____
 Pet #2 Type & Breed _____ Weight _____
 Pet #3 Type & Breed _____ Weight _____
 Not all pet types and breeds are permitted in the leased premises, please check with leasing agent.
 Each pet is required to be registered. FEES: Non-refundable Pet Fee of \$200/pet and monthly Pet Rent \$20/pet.

I hereby submit this application to rent and, if accepted, agree to lease at the monthly rental rate of \$ _____
for the premises located at _____ (Address), in _____, MO

How did you Hear About Us?

_____ St. Louis Post Dispatch _____ Sign / Drive-By _____ Suburban Journal
 _____ For Rent Magazine _____ Referred By: _____
 _____ Rent.com _____ Other (Describe): _____

Premises shall be occupied only by persons herein above set out and, if otherwise, shall constitute a violation of the tenancy and subject to termination.

OCCUPANTS

List names and birthdates of all additional Occupants (excluding applicant and co-applicant):

_____	____/____/____	_____	____/____/____
_____	____/____/____	_____	____/____/____
_____	____/____/____	_____	____/____/____

IMPORTANT INFORMATION - PLEASE READ

ALL APPLICANTS WILL BE SCREENED UNIFORMLY ON BASIS OF CREDIT INFORMATION, EMPLOYMENT RECORD, INCOME, EXPENSES AND PREVIOUS TENANCY, WITHOUT REGARD TO FAMILY STATUS, PHYSICAL DISABILITY, RACE, COLOR, RELIGION, SEX OR NATIONAL ORIGIN. APPLICANTS SIGNATURE BELOW CONSTITUTES HIS/HER KNOWLEDGE OF THIS NON-DISCRIMINATORY POLICY. APPLICATION SUBJECT TO APPROVAL BY OWNER, WHICH IF ACCEPTED SHALL BE EVIDENCED BY COUNTERSIGNING IREMCO, INC. IF APPLICATION IS REJECTED, DEPOSIT IS REFUNDED. IF APPROVED, AND APPLICANT(S) DECIDES NOT TO TAKE SAID PREMISES, NO DEPOSIT REFUND WILL BE MADE. PROVIDING FALSE INFORMATION ON APPLICATION OR HAVING A CRIMINAL HISTORY WILL BE CONSIDERED REASON TO REJECT APPLICATION.

Applicant(s) tenders, in addition to any security deposit, the amount of \$40.00 in the form of money order only, which applicant(s) acknowledge is the cost of procuring credit report and criminal background check and is non-refundable. Credit Reports are obtained thru Trans Union Credit and Criminal Background Checks are obtained thru Sentrylink. While employees and agents of Iremco, Inc. are not at liberty to discuss your credit report or criminal check with you, you are welcome to contact Trans Union at (314) 241-4333 or Sentrylink at (877) 736-8791 if you want a copy or information about your reports.

Applicant acknowledges that he/she has been provided a Missouri Broker Disclosure form by Iremco, Inc. As required by the Missouri Real Estate Commission.

Lease Terms _____	Application Fee	<u>\$40.00 NON-REFUNDABLE</u>
Move In Date _____	Deposit with Application	_____
		<small>(\$50 Apt / \$100 House & Condo)</small>
Rent To Start Date _____	Balance Deposit Due*	_____
		<small>*(Within seven (7) days)</small>
Monthly Rental Amount _____	One Time Pet Fee	_____
<small>(Base Rent & Monthly Pet Fee)</small>		<small>(Due at Move In - Non-Refundable)</small>

*Balance of Security Deposit is due within seven (7) days after approval of tenancy. Failure to pay will result in forfeiture of deposit with application, and said premises will be back on the rental market.

Leasing Agent: _____ Please sign and date:
Applicant: _____

X	X
Office Use Only:	
<input type="checkbox"/> Approved _____ / _____ / _____	Date: _____ / _____ / _____
By: _____	Co-Applicant: _____
<input type="checkbox"/> Denied _____ / _____ / _____	
By: _____	X
Reason: _____	Date: _____ / _____ / _____

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RENTAL VERIFICATION

ATTENTION APPLICANT: PLEASE SIGN BY THE "X's" ONLY, DO NOT FILL IN THE BLANKS. THANK YOU.

LANDLORD NAME _____ LANDLORD FAX# _____

APPLICANT NAME(S): 1. _____ 2. _____

APPLICANT(S) SIGNATURE: X _____ X _____

I/WE HEREBY AUTHORIZE YOU TO RELEASE THE FOLLOWING RENTAL INFORMATION TO IREMCO, INC.
THIS INFORMATION IS FOR CONFIDENTIAL USE IN COMPILING A RENTAL APPLICATION. PLEASE
COMPLETE AND RETURN TO IREMCO, INC. **FAX 636-530-1686 TELEPHONE 636-530-7171**

TENANT ADDRESS _____

MOST RECENT MONTH RENT _____ MOVE IN DATE _____

HOW OFTEN WAS RENT LATE? _____ MOVE OUT DATE _____

CURRENT BALANCE DUE _____ ANY NSF CHECKS _____

ANY PROBLEMS WITH TENANT? _____

THANK YOU FOR YOUR PROMPT ATTENTION!

LANDLORD NAME INFORMATION VERIFIED BY:

EMPLOYMENT VERIFICATION

ATTENTION APPLICANT: PLEASE SIGN BY THE "X's" ONLY, DO NOT FILL IN THE BLANKS. THANK YOU.

EMPLOYER NAME _____ EMPLOYER FAX# _____

APPLICANT NAME(S): 1. _____ 2. _____

APPLICANT(S) SIGNATURE: X _____ X _____

I/WE HEREBY AUTHORIZE YOU TO RELEASE THE FOLLOWING EMPLOYMENT INFORMATION TO IREMCO.
THIS INFORMATION IS FOR CONFIDENTIAL USE IN COMPILING A RENTAL APPLICATION. PLEASE
COMPLETE AND RETURN TO IREMCO, INC. **FAX 636-530-1686 TELEPHONE 636-530-7171**

EMPLOYEE NAME _____ SS# _____

EMPLOYEE POSITION _____

LENGTH OF EMPLOYMENT/HIRE DATE _____

TOTAL NET MONTHLY INCOME _____

OTHER COMMENTS _____

NAME OF PERSON COMPLETING VERIFICATION _____