

Copy of Driver's License

Huntington Village

100 Ivy Drive
Charlottesville, Virginia 22903
(434) 296-5587

APPLICATION FOR TENANCY

Name _____ S. S. No. _____ Age _____
First Middle Last

Spouse's Name _____ S. S. No. _____ Age _____

Marital Status _____ No. Children _____ Ages _____

How Many Persons Will Regularly Occupy Unit? _____ No. Cars _____

Present Address: _____ Dates of Residency: _____

City _____ State _____ Zip _____ Telephone (____) _____

Landlord/Rental Agent _____ Telephone (____) _____

Address _____ City _____ State _____ Zip _____

Previous Address: _____ Dates of Residency _____

City _____ State _____ Zip _____

Landlord/Rental Agent _____ Telephone (____) _____

Address _____ City _____ State _____ Zip _____

CURRENT OCCUPATION _____ SALARY _____ Date of Employment _____

Employer _____ (____) _____ Supervisor _____

Name

Address

Phone

SPOUSE'S OCCUPATION _____ SALARY _____ Dates of Employment _____

Employer _____ (____) _____ Supervisor _____

Name

Address

Phone

STUDENT _____ GRADUATE SCHOOL OF: _____ GRADUATION DATE _____

PERSON TO NOTIFY IN CASE OF EMERGENCY: _____

Name

Relationship

City _____ State _____ Zip _____ (____) _____ (____) _____

Home Telephone

Business Telephone

REFERENCES: (PLEASE SPECIFY TYPE OF ACCOUNT)

Credit: _____ Type Acct.: _____ Location _____

Credit: _____ Type Acct.: _____ Location _____

Personal _____ (____) _____

Name

Address

Phone

Years Known _____ Relationship _____

Have You Ever: Filed For Bankruptcy? _____ NO _____ YES _____ DATE

Evicted From Tenancy? _____ NO _____ YES _____ DATE

Reason: _____

APPLICATION FEE: \$20.00 (Non-Refundable)

BACK-OUT FEE AFTER LEASE IS SIGNED: Entire Deposit Retained (Prior To Move-In)

I/We Warrant All Information Listed Above is True And Do Hereby Authorize The Release Of This Information To The Management Of Ivy Gardens For The Purpose Of Verification.

Signature

Date

Spouse's Signature

Date

FOR OFFICE USE ONLY:

SECURITY DEPOSIT REQUIRED: _____ Amt. Paid With Application _____ Date: _____

Balance Due Prior To Lease _____ Date Deposit Paid In Full _____

Unit No. _____ Size _____ Location _____ U / F Monthly Rent _____

Lease Dates From _____ To _____ Prorated Rent: First Month _____ Last Month _____