

PO Box 62 | Hamilton, OH 45012 | P: 513.820.2897 | F: 513.372.8272 | dhent.net

#### Dear Potential Resident,

We would like to take this opportunity to thank you for considering us for your housing needs. If we do not currently have a house available that fits your needs, we can add you to our waiting list (great idea since most of our homes are rented before they are completed). Please take a few minutes to complete the application. Everyone over the age of 18 must complete a separate application. You may either email, fax, or leave your application in our mailbox. All of our contact information is above.

We strive on approving applications as quickly as possible. We do our best to have an answer within 24-48 hours weekdays. Here are a few things that you can do to help speed up this process:

- Fill out the **entire** application
- Applicants must sign the release form
- Attach pay stubs
- Attach proof of Child Support, SSI, or SSD
- If self-employed, verify your income with copies of tax returns, 1099's and/or relevant data.
- Attach a copy of Applicant and Co-Applicants Photo ID
- Provide working phone numbers for Landlords & Employment
- Email or fax your application to the office
- Any incomplete applications will not be processed and any false information or deliberate misrepresentation of facts will automatically be disqualfied

If you are accepted, you will be required to sign a rental agreement in which you will agree to abide by the rules of the rental unit or complex. A complete copy of our rental agreement is available for anyone who would like to review. Please email <a href="mailto:dhentmgr@outlook.com">dhentmgr@outlook.com</a> if you would like a copy. In addition to other important requirements, please note that your rental agreement will:

- Require that you prevent all household members, guest, and visitors from engaging in any lease violating behavior
- Forbid you and any member of your household, or your guest, from engaging in illegal drug use, sale, manufacture, distribution, or other criminal activity on or near the property.
- Limit your ability to allow quests to stay for long periods without the advance permission of the landlord.
- Provide that serious or repeated violations of the lease requirements on these items, or any other item addressed by the rental agreement will result in termination of your rental agreement.
- We do not provide Appliances
- Pet fee (provided pets are accepted) which is an additional \$50 per month, per pet, and an additional \$100 non-refundable pet deposit, per pet. No pets allowed in our apartments. Dogs not accepted: Rottweiler, bull dog, pit bull, doberman pinchers, wolf breeds and chows.

Please read the entire rental agreement carefully, as we take each part of the agreement seriously. The agreement has been written to help us prevent illegal activity from disturbing the peace of our rental units and to help make sure that our residents are given the best housing we can provide. Any false statements or deliberate misrepresentation of facts will automatically disqualify the application.

We look forward to receiving your application and having the opportunity to provide you with quality housing. We will contact you if you qualify. If we don't currently have a house available that fits your needs, we will add you to our waiting list. If you have any questions, please email us at <a href="mailto:dhentmgr@outlook.com">dhentmgr@outlook.com</a> Thank you.

| I have read and understand the terms above: |           |      |
|---|-----------|------|
|   | Signature | Date |

# DH ENTERPRISES OF HAMILTON, LLC LEASE APPLICATION

Phone: 513-820-2897 Fax 513-372-8272

Email: dhentmgr@outlook.com

Application must be filled out completely. Applicants must show driver's license or other picture I.D.

Everyone over the age of 18 must complete a separate application

| Date.                   |                 |                            |                   |                        |                              |
|-------------------------|-----------------|----------------------------|-------------------|------------------------|------------------------------|
| How many bedrooms       | s and bathroon  | ns would you li            | ke?/_             |                        |                              |
| Which house are you     | applying for?   |                            |                   |                        |                              |
| How much can you a      | fford for rent? |                            |                   |                        |                              |
| What area(s) are you    | looking for? _  |                            |                   |                        |                              |
| How soon would you      | like to move?   |                            |                   |                        |                              |
| How long do you plan o  | on living here: | ]1 year                    | ear 🗌 3 year      |                        |                              |
| If you have a pet we do | require a non-r | efundable pet fe           | e of \$100 plus a | n additional \$50      | more rent per month, per pet |
| How did you hear ab     | out us? Nev     | wspaper Sig                | n 🗌 Friend 🛚      | Website                | Craigslist Other             |
| Applicant:              |                 |                            |                   |                        |                              |
| Last Name               |                 | First                      |                   | Middle                 | Maiden                       |
| Date of Birth           | So              | c.Sec.#                    |                   | Telephone <sub>.</sub> |                              |
| Cell Phone              |                 | W                          | ork phone         |                        |                              |
| Driver's License #      |                 |                            | Driver's          | License State _        |                              |
| Email Address:          |                 |                            |                   |                        |                              |
| How many people ar      | e applying toge | ether?                     |                   |                        |                              |
| Names of other appli    | cants?          |                            |                   |                        |                              |
| Names of children liv   | ing in home ur  | ider the age of            | 18?               |                        |                              |
| Have you applied to     | rent from DH E  | nterprises of H            | amilton, LLC in   | the past?              | If so, When?                 |
| List all vehicles tha   | t will be park  | ed at the pro <sub>l</sub> | perty:            |                        |                              |
| License Plate #         | State           | Make                       | Year              | Color                  | VIN#                         |
| License Plate #         | State           | Make                       | Year              | Color                  | VIN#                         |

# List your last five years residence history Current Address:

| Street Type of property (apartment, duplex/4-plex | Apt<br>, townhouse, co | _ City<br>ndo, mobile | State Zipe home, home, etc)            |
|---|------------------------|-----------------------|--|
| Landlord's Name                                   |                        |                       | Landlord's Telephone                   |
| How long at present address?                      |                        |                       | Month & Year Moved In                  |
| Monthly Rent or Mortgage \$                       |                        |                       | Number of Bedrooms Rented/Owned        |
| Reason for Leaving                                |                        |                       |  |
| Do you pay? Heat ( yes, no )                      | Cooking Fuel ( y       | es, no )              | Electric ( yes, no ) Water ( yes, no ) |
| Name used for billing by: Gas & Electric Co       | ·                      |                       | Water Co                               |
| Telephone Co                                      | For Telephone          | e Number(             | )                                      |
| Previous Address: Street                          | Apt                    | _ City                | State Zip<br>e home, home, etc)        |
| Type of property (apartment, duplex/4-plex        | , townhouse, coi       | ndo, mobil            | e home, home, etc)                     |
| Landlord's Name                                   |                        |                       | Landlord's Telephone                   |
| Month & Year Moved In                             |                        |                       | Month & Year moved out                 |
| Monthly Rent or Mortgage \$                       |                        |                       | Number of Bedrooms Rented/Owned        |
| Reason for Leaving                                |                        |                       |  |
| Previous Address:                                 |                        |                       |  |
| Street Type of property (apartment, duplex/4-plex | Apt<br>, townhouse, co | _ City<br>ndo, mobil  | State Zip<br>e home, home, etc)        |
| Landlord's Name                                   |                        |                       | Landlord's Telephone                   |
| Month & Year Moved In                             |                        |                       | Month & Year moved out                 |
| Monthly Rent or Mortgage \$                       |                        |                       | Number of Bedrooms Rented/Owned        |
| Reason for Leaving                                |                        |                       |  |
| Previous Address:                                 |                        |                       |  |
| Street Type of property (apartment, duplex/4-plex | Apt<br>, townhouse, co | _ City<br>ndo, mobil  | StateZip<br>e home, home, etc)         |
| Landlord's Name                                   |                        |                       | Landlord's Telephone                   |
| Month & Year Moved In                             |                        |                       | Month & Year moved out                 |
| Monthly Rent or Mortgage \$                       |                        |                       | Number of Bedrooms Rented /Owned       |
| Reason for Leaving                                |                        |                       |  |

**List your employment history for the last five years** (Please include titles or military ranks, etc. Note: If you are self employed you will be required to substantiate your income with copies of tax returns, 1099's and/or relevant data)

| Current Employer               |                       |                 |                  |                   |
|--------------------------------|-----------------------|-----------------|------------------|-------------------|
| Position / Job Description     |                       |                 |                  |                   |
| Supervisor Name                |                       | Phone           |                  | -                 |
| Address                        | City                  | State_          | Zip              |                   |
| Length of Time Employed        | _yrs mos.             |                 | Monthly Net Inco | me \$             |
| Monthly take-home \$0          | Other source of curre | nt income? Sour | ce               | Monthly Income \$ |
| Alimony or child support you P | AY \$/                |                 | RECEIVE \$       | J                 |
| Former Employer                |                       | Dates           |                  |                   |
| Address                        |                       | _               |                  |                   |
| Position / Job Description     |                       |                 |                  |                   |
| Supervisor Name                |                       | Phone           |                  | -                 |
| Address                        | City                  | State_          | Zip              |                   |
| Length of Time Employed        | _ yrs mos.            |                 | Monthly Net Inc  | come \$           |
| Former Employer                |                       | Dates           |                  |                   |
| Address                        |                       | _               |                  |                   |
| Position / Job Description     |                       |                 |                  |                   |
| Supervisor Name                |                       | Phone           |                  | -                 |
| Address                        | City                  | State_          | Zip              |                   |
| Length of Time Employed        | yrs mos.              |                 | Monthly Net      | Income \$         |
| Former Employer                |                       | Dates           |                  |                   |
| Address                        |                       | _               |                  |                   |
| Position / Job Description     |                       |                 |                  |                   |
| Supervisor Name                |                       | Phone           |                  | -                 |
| Address                        | City                  | State_          | Zip              |                   |
| Length of Time Employed        | _yrs mos.             |                 | Monthly Ne       | t Income \$       |

## List bank accounts:

| Bank Name                             | Account#                            | Checking/Savings  |         | Approx. Balance    |
|---------------------------------------|-------------------------------------|---|---------|--------------------|
| 1                                     |                                     |   |         |                    |
| 2                                     |                                     |   |         |                    |
| Credit cards & Loans<br>Creditors     | what are your approximat<br>Address | te scheduled total monthly payment<br>Account #                   | Balance |                    |
| 1                                     |                                     |   |         |                    |
| 2                                     |                                     |   |         |                    |
|                                       |                                     | ving person(s) are trusted friendes, or phone calls on my behalf. |         |                    |
| Name                                  |                                     | Address   |         |                    |
| Phone                                 |                                     | Relationship  |         |                    |
| Name                                  |                                     | Address   |         |                    |
| Phone                                 |                                     | Relationship  |         |                    |
|                                       |                                     | accountant, lawyer, banker, etc                                   |         |                    |
| Phone                                 |                                     | Relationship  |         |                    |
| Name                                  |                                     | Address   |         |                    |
| Phone                                 |                                     | Relationship  |         |                    |
| Physician For Emerg                   | gency :                             |   |         |                    |
| Name                                  |                                     | Address   |         |                    |
| Phone                                 |                                     |   |         |                    |
| List all pets that live<br>Pet's name |                                     | sex/neutered/spayed   |         | indoor/outdoor/bot |
| 1                                     |                                     |   |         |                    |
| 2                                     |                                     |   |         |                    |
|                                       |                                     | Painting Electrical Mechanic                                      |         |                    |
| Other                                 |                                     |   |         | _                  |
| Tools you own:                        | ol hox  Mower  Vard                 | tools Snow Shovel   |         |                    |

| Name of your attorney:  | _            |
|---|--------------|
| Mothers Maiden Name:  | _            |
| Would you like to buy a home within the next 2 years?   |              |
| If yes, ask us about our Future Homebuyers Program!   |              |
| Have you had any problems with your past landlord? If yes what?   | _            |
| Are there any problems with the house you're living in now? If yes what?  | -<br>-       |
|   | _            |
| Please answer the following questions (explain your answers on additional page(s) as necessary)   |              |
| If this Application is Accepted do you have the first month rent and deposit ( ) Yes ( ) No   |              |
| If No, how much do you have now? \$   |              |
| Have you ever filed bankruptcy? ( ) Yes ( ) No  |              |
| Have you ever been involved in any judgment or other legal proceedings (Criminal, Civil or Other)? ( ) Yes ( ) No   |              |
| Are there any outstanding judgments against you? ( ) Yes ( ) No   |              |
| Have you ever been convicted or pled guilty to a felony or misdemeanor? ( ) Yes ( ) No  |              |
| Have you ever been convicted for dealing or manufacturing illegal drugs? ( ) Yes ( ) No   |              |
| Have you ever been Evicted or asked to move from any tenancy? ( ) Yes ( ) No  |              |
| Have you ever broken a rental agreement or lease? ( ) Yes ( ) No  |              |
| Have you ever willfully or intentionally refused to pay rent when due? ( ) Yes ( ) No   |              |
| Have you ever changed your name? ( ) Yes ( ) No   |              |
| Do you know of anything, which may interrupt your income or ability to pay rent? ( ) Yes ( ) No   |              |
| Rent is due on the 1 <sup>st</sup> of each month. Are you able to fulfill this requirement? ( ) Yes ( ) No  |              |
| Is your credit good? ( ) Yes ( ) No   |              |
| List any additional information you think will help us process your application (attach additional pages if necessary),   |              |
| I have re-examined the information which I have provided on this application, and I agree that it is true and complete. I understand that false or incomplete information on this application shall be grounds for rejection of my application and/or immediate eviction.   |              |
| <b>Rental history verifiable from unbiased sources</b> . If you are related by blood or marriage to one of the previous landlords listed, or your rhistory does not include at least two previous landlords, we may require: a qualified co-signer on your rental agreement (qualified co-signer all applicant screening criteria) or an additional security deposit of \$1000 may apply. |              |
| If this application is accepted, I agree to:  |              |
| 1) Sign the Owner/Agent's Lease Agreement and any related addendums within 3 days of the acceptance of this application;  |              |
| 2) Pay the balance of my Security Deposit in certified check, cashier's check, or money order within 3 days of the acceptance of this ap  |              |
| <ul> <li>Pay the first monthly rental installment in certified check, cashier's check, or money order prior to receiving keys or taking occupan</li> <li>LANDLORD'S FAILURE TO DELIEVER PREMISES: in the event landlord cannot deliever possession of the premises to resident upon</li> </ul>  | •            |
| upon date, through no fault of landlord, then landlord shall have no liability, but the rent herin provided shall abate until possessi  | -            |
| Landlord shall have thirty (30) days in which to give possession, and if possession is tendered withinsuch time, resident agrees to   | _            |
| demised premises and pay the rent herein provided from that date. In the event possession cannot be delivered within such time,   |              |
| fault of landlord, then this lease and all rights hereunder shall teminate  |              |
| I understand that if this application is accepted and I decide not to rent the residence, my deposit will be forfeited.   |              |
| I hereby authorize DH ENTERPRISES OF HAMILTON, LLC, to obtain information concerning my past and present credit,  | rental, or   |
| employment history, and to answer any questions in the future regarding their experience with me. I hereby authorize any of the   | ne following |
| sources, including but not limited to (1) credit reporting agencies, (2) public or privately owned utility companies, (3) government  | _            |
| agencies, and (4) current or past landlords, employers, or creditors, to release any said information to the above named party. I her   |              |
| any of the above sources, their officers, agents, or employees, from any liability for damages of any kind whatsoever, whethe negligence or not, which may at any time result to me by reason of compliance with the above mentioned inquiry, which may include the   |              |
| of specific questions and the giving of any information concerning my present or past record.   |              |
| Applicant Signature   |              |
| Applicant Signature Date  |              |

\*Pets by Agreement Only\*

\*No Vicious Breeds of Dogs\*

### **AUTHORIZATION TO RELEASE**

### **INFORMATION**

| Date |
|------|
|      |

#### To Whom It May Concern:

I do hereby authorize <u>DH ENTERPRISES OF HAMILTON, LLC</u> to obtain information concerning my past, present and future credit, rental or employment history. I hereby authorize any of the following sources including but not limited to (1) credit reporting agencies, (2) public or privately owned utility companies. (3) governmental housing agencies and (4) current or past landlords, employers or creditors, to release any said information to the above named party. I hereby release any of the above sources, their officers, agents, or employees from any liability for damages of any kind whatsoever, whether caused by negligence or not, which may at any time result to me by reason of compliance with the above mentioned inquires, which may include the answering of specific questions and the giving of any information concerning my present or past record.

Additionally, I give the above named party permission to copy and submit this form as needed for the purpose of processing my rental application or to continue to get information for credit collections.

| Signed            |
|-------------------|
| Name              |
| Address           |
|                   |
| Date of Birth     |
| Social Security # |

