



## SCREENING CRITERIA



Welcome to PepZee Realty! We're glad you have chosen to apply with us. We offer many different styles, sizes, areas and price ranges. Our goal is to make sure you are happy and comfortable in your new home. Below are the guidelines to make this a success:

Each occupant over the age of 18 must complete an application. All leaseholders must individually meet the screening criteria.

- ✓ Good, verifiable rental history for at least the past two years. No evictions in the past two years.
- ✓ Employed minimum 6 months with current employer
- ✓ Must **NET** (bring home) 3X the rent in a month AND/OR
  - Receive another source of income (SSI, SSDI, pension, agency) AND/OR
  - Have an approved Payee
- ✓ Background check:
  - No current offenses or warrants (Traffic not included)
  - Felony Criminal – At least 2 years old
  - Felony Drugs – No drug dealing convictions whatsoever
  - Possession – At least 2 years old
  - Domestic Violence – At least 2 years old
  - Violent Felony – At least 5 years old
  - Sex Offenders- Must notify community – Abide by Rules/Laws

The following items are required to process an application:

- ✓ \$30 **NON-REFUNDABLE** Fee For Each Application
  - Money Order Only
- ✓ Valid photo identification (IDs are for identification purposes only and not used in approval process. Photo IDs are destroyed immediately if the application is not approved.)
- ✓ Proof of Income for the last 30 days
  - Pay stubs for last 30 days, benefit letter dated in the last 30 days, SSI/SSDI statement
- ✓ Application must be filled out completely
  - Write N/A or cross it out if an item does not apply to you
  - Incomplete applications may result in delay or denial

**EQUAL HOUSING OPPORTUNITY. LANDLORD MAKES THIS HOUSING AVAILABLE WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, FAMILIAL STATUS, DISABILITY (HANDICAP), MILITARY STATUS, OR ANCESTRY.**

## PEPZEE REALTY RENTAL APPLICATION

Fax to 937-275-0003, email to [info@pepzee.com](mailto:info@pepzee.com), or bring in to 1013 N Main St, Dayton, OH 45405  
Please allow 3-5 business days to process application

**Today's Date:** \_\_\_\_\_

**Address(s) Applying for:** \_\_\_\_\_

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### How Did You Hear About Us?

- Craigslist       PepZee Website     Sign       Flyer       Zillow/Trulia/Hotpads  
 Agency       Apartments.com     Word of Mouth     Other \_\_\_\_\_

PepZee Tenant Referral \_\_\_\_\_

Why are you moving? (Check all that apply and describe)

- More space \_\_\_\_\_       1st Apt \_\_\_\_\_  
 Trouble w/Landlord \_\_\_\_\_       Downsizing \_\_\_\_\_  
 Relocating \_\_\_\_\_       Other \_\_\_\_\_

### APPLICANT:

First Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last Name: \_\_\_\_\_

Maiden Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ SS #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Home #: (\_\_\_\_\_) \_\_\_\_\_ Cell #: (\_\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

DL#: \_\_\_\_\_ DL State: \_\_\_\_\_ ID #: \_\_\_\_\_ ID State: \_\_\_\_\_

### CURRENT ADDRESS:

Street: \_\_\_\_\_ Apt: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Landlord's Name: \_\_\_\_\_ LL Phone #: (\_\_\_\_\_) \_\_\_\_\_

LL Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Month/Year Moved In: \_\_\_\_\_ Month /Year Moved Out: \_\_\_\_\_ # of Bedrooms: \_\_\_\_\_

Rent per month: \$ \_\_\_\_\_

### PREVIOUS ADDRESS:

Street: \_\_\_\_\_ Apt: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Landlord's Name: \_\_\_\_\_ LL Phone #: (\_\_\_\_\_) \_\_\_\_\_

LL Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Month/Year Moved In: \_\_\_\_\_ Month /Year Moved Out: \_\_\_\_\_ # of Bedrooms: \_\_\_\_\_

Rent per month: \$ \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

### PREVIOUS ADDRESS:

Street: \_\_\_\_\_ Apt: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Landlord's Name: \_\_\_\_\_ LL Phone #: (\_\_\_\_\_) \_\_\_\_\_

LL Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Month/Year Moved In: \_\_\_\_\_ Month /Year Moved Out: \_\_\_\_\_ # of Bedrooms: \_\_\_\_\_

Rent per month: \$ \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

**OTHER OCCUPANTS OVER 18 YEARS OLD THAT WILL BE LIVING AT THE ADDRESS:**

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

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

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

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

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

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

What Kind of Pets do you have (describe): **\*Pets are by Agreement Only\***

\_\_\_\_\_  
\_\_\_\_\_

Where you live now, do you pay (yes or no): Heat (\_\_\_\_) Electric (\_\_\_\_) Water (\_\_\_\_)

Are the utilities in your name? (Circle One) Yes No If not, in whose name are the utilities?

Gas Co: \_\_\_\_\_ Electric Co: \_\_\_\_\_ Water Co: \_\_\_\_\_

**Vehicles That Will Be Parked At Address:**

License Plate #: \_\_\_\_\_ State: \_\_\_\_\_ Year & Make: \_\_\_\_\_ Color: \_\_\_\_\_

License Plate #: \_\_\_\_\_ State: \_\_\_\_\_ Year & Make: \_\_\_\_\_ Color: \_\_\_\_\_

License Plate #: \_\_\_\_\_ State: \_\_\_\_\_ Year & Make: \_\_\_\_\_ Color: \_\_\_\_\_

**Personal References (no relatives):**

Name: \_\_\_\_\_ Phone:(\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Years Known: \_\_\_\_\_

Name: \_\_\_\_\_ Phone:(\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ Years Known: \_\_\_\_\_

**Closest Living Relative:**

Name: \_\_\_\_\_ Phone:(\_\_\_\_) \_\_\_\_\_ Relationship: \_\_\_\_\_

**In Case of Emergency Contact:**

Name: \_\_\_\_\_ Phone:(\_\_\_\_) \_\_\_\_\_ Relationship: \_\_\_\_\_

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

**Physician for Emergency:**

Name: \_\_\_\_\_ Telephone :(\_\_\_\_) \_\_\_\_\_

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

**JOB HISTORY**

**Current**

**Employer:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_  
Address: \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
Telephone: (\_\_\_\_\_) \_\_\_\_\_ **Position:** \_\_\_\_\_  
Start Date (Month/Year) \_\_\_\_\_ **End Date (Month/Year)** \_\_\_\_\_  
Monthly Income After Taxes: \$ \_\_\_\_\_

**Second/Previous (Circle One)**

**Employer:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_  
Address: \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
Telephone: (\_\_\_\_\_) \_\_\_\_\_ **Position:** \_\_\_\_\_  
Start Date (Month/Year) \_\_\_\_\_ **End Date (Month/Year)** \_\_\_\_\_  
Monthly Income After Taxes: \$ \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

**Third/Previous (Circle One)**

**Employer:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_  
Address: \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
Telephone: (\_\_\_\_\_) \_\_\_\_\_ **Position:** \_\_\_\_\_  
Start Date (Month/Year) \_\_\_\_\_ **End Date (Month/Year)** \_\_\_\_\_  
Monthly Income After Taxes: \$ \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

**Other Sources of Current Income (SSI, SSDI, Food Stamps, OWF, Child Support, Pension, etc):**

\_\_\_\_\_ Monthly: \$ \_\_\_\_\_  
\_\_\_\_\_ Monthly: \$ \_\_\_\_\_  
\_\_\_\_\_ Monthly: \$ \_\_\_\_\_  
\_\_\_\_\_ Monthly: \$ \_\_\_\_\_

(must show proof of this income to be included)

**Financial References:**

Bank Name \_\_\_\_\_  
Do you have a checking account? \_\_\_\_\_ Savings account? \_\_\_\_\_

**Payee Information:**

Contact Name: \_\_\_\_\_  
Phone: (\_\_\_\_\_) \_\_\_\_\_

1. If this Application is accepted do you have the first month rent and deposit?    Yes    No  
     If No, how much do you have now? \$ \_\_\_\_\_
  2. When do you want to move?      Now      1st of Month      After 1st      Other
  3. Have you ever filed bankruptcy?      Yes      No
  4. Have you **EVER** had any criminal convictions?      Yes    No
  5. Have you **EVER** been served an eviction notice or been asked to vacate a property you were renting?      Yes      No
  6. Have you ever willfully or intentionally refused to pay rent when due?      Yes      No
  7. Have you ever changed your name?      Yes      No
- If your answer is “yes” to any of the above questions, please provide explanation below:

**Explanation of Questions 4-7:**

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**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 providing false or incomplete information on this application shall be grounds for rejection of my application and/or immediate eviction.**

**By signing this application I agree to:**

1. Sign the Owner/Agent’s Lease Agreement and any related addendums within 30 days of acceptance of this application;
2. Pay my Security Deposit with a certified check, cashier’s check, or money order within 30 days of the acceptance of this application;
3. Pay the first monthly rental installment with a certified check, cashier’s check, or money order prior to receiving keys or taking occupancy.
4. I will have the appropriate utilities turned on before receiving keys or taking occupancy  
     *(Utilities must be in tenant’s name.)*

**(PLEASE INTIAL)** DP&L \_\_\_\_\_ Vectren \_\_\_\_\_ Water \_\_\_\_\_

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



## Authorization to Release Information

To Whom It May Concern:

I do hereby authorize **PepZee Realty and/or its agents** to obtain information concerning my past and present 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, physicians 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.

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

Date of Birth: \_\_\_\_\_ Last Four Digits of SS #: \_\_\_\_\_

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

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