

**RENTAL APPLICATION  
FOR OFFICE USE ONLY**

APP FEE \_\_\_\_\_  
 GUARANTEE FEE \_\_\_\_\_  
 DATE \_\_\_\_\_  
 CK # \_\_\_\_\_  
 TM# \_\_\_\_\_  
 RC \_\_\_\_\_  
 APPROVAL \_\_\_\_\_  
 DATE APPROVED \_\_\_\_\_



750 Hethwood Blvd., #100-G  
 Blacksburg, VA 24060  
 540-951-1221 1-800-525-3432



**APARTMENT ASSIGNMENT  
FOR OFFICE USE ONLY**

APT. \_\_\_\_\_  
 LSD/LED \_\_\_\_\_  
 RENT \_\_\_\_\_  
 CARPET \_\_\_\_\_  
 SIZE \_\_\_\_\_  
 AMENITY \_\_\_\_\_  
 FURNITURE \_\_\_\_\_  
 ANIMAL \_\_\_\_\_

Name (Please Print) \_\_\_\_\_ Date of Application \_\_\_\_\_  
 (first) (middle) (last) Date Apartment Needed \_\_\_\_\_

**Options: Please list a first and second choice**

<b>Size:</b> 1br _____ w/den _____ 2br _____ w/den _____ 3br _____ w/den _____ 4br _____ w/den _____	<b>Floor:</b> 1st enclosed patio _____ 1st walk-out patio _____ 2nd _____ 3rd _____	<b>Apartment Location:</b> Foxridge _____ Fox Croft _____ Fox Run _____ Copper Croft _____ Stroubles Crossing _____	<b>Amenities:</b> Washer/Dryer in Apt. _____ Washer/Dryer hook-up _____ Custom Upgrade _____ Furniture _____	<b>Lease:</b> New _____ Rmmt Chg _____ Sublease _____
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Special Requests: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\*Resident furnished Washer/Dryer \_\_\_\_\_  
 \*Waterbed \_\_\_\_\_  
 \*Satellite Dish \_\_\_\_\_  
 (Proof of Insurance Required)

**NOTE: FLOOR AND APARTMENT LOCATION WILL BE MATCHED WHERE POSSIBLE: HOWEVER, PREFERENCES ARE NOT BINDING.** A \$35.00 application fee must accompany this application or \$70.00 if filing jointly with a spouse. The application fee is non-refundable and applied to the processing cost of the application. If the application is approved; lease must be signed and all monies paid prior to 7 days after receiving lease. A \$35.00 or \$70.00 if filing jointly with a spouse processing fee will be charged for administrative cost upon cancellation, at any time, for any reason. \*Residents that are using these items are required to have renters insurance. We strongly recommend that all residents obtain renter's insurance.

**ANIMALS:** Do you have an animal?  Yes  No  
 Number of animals \_\_\_\_\_ Breed \_\_\_\_\_ Weight \_\_\_\_\_

**No animal may exceed 60 lbs. at full grown weight. Dangerous, harmful or poisonous animals will not be allowed.** Veterinarian verification of weight is required on all dogs. A maximum of 3 animals are allowed in the apartment. Of the 3 animals allowed, no more than 2 dogs are allowed. No animals are allowed at or after move-in without prior agreement to all animal regulations. **Any animal not registered with the Welcome Center will result in a \$300.00 illegal animal fine, per animal and per occurrence.** Please ask Leasing Consultant for information on additional fees and deposits.

I understand that it is intended the apartment will be ready for occupancy close to requested move-in date. I agree that Foxridge and Hethwood Communities shall not be under any obligation related to approval of this application or for any reason. I further agree that the full security deposit is applied to damages upon cancellation of my apartment. Foxridge and Hethwood Communities cannot assume responsibility for the inability to furnish resident with any apartment on the specified date where construction delays, repairs, holdovers, or the lack of availability prevents us from providing occupancy of the assigned apartment.

LIST COMPLETE NAMES OF ALL OCCUPANTS \_\_\_\_\_  
 \_\_\_\_\_

**NOTE:** All occupants that are not leaseholders must complete an occupant information form. Occupants are subject to approval by management pending a criminal background check. If the occupant is 18 years or older, a \$35 Occupant Fee per occupant will be required.

Why are you moving? \_\_\_\_\_  
 How did you hear about Foxridge and Hethwood Communities? \_\_\_\_\_

**APPLICANT INFORMATION:**

APPLICANT'S SOCIAL SECURITY NUMBER \_\_\_\_\_ BIRTHDATE \_\_\_\_\_  
VEHICLE INFORMATION: MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ YEAR \_\_\_\_\_ COLOR \_\_\_\_\_ LICENSE \_\_\_\_\_  
**THE PARKING OF TRAILERS, BOATS AND ALL OTHER RECREATIONAL VEHICLES IS PROHIBITED AT FOXRIDGE & HETHWOOD APARTMENTS.**  
IF STUDENT, WHAT YEAR IN COLLEGE PRESENTLY? \_\_\_\_\_ WHAT DEPARTMENT? \_\_\_\_\_  
CURRENT ADDRESS (P.O. BOX AND STREET ADDRESS) \_\_\_\_\_  
TOWN, STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_  
CURRENT LEASE EXPIRATION DATE \_\_\_\_\_ WHERE I HAVE LIVED FOR \_\_\_\_\_ (YRS./MTHS.), WHICH I OWN \_\_\_\_\_ RENT AT \$ \_\_\_\_\_  
PREVIOUS OR CURRENT OWNER/AGENT AND ADDRESS \_\_\_\_\_  
PHONE \_\_\_\_\_

GIVE PAST TWO RESIDENCES:

1.) \_\_\_\_\_  
2.) \_\_\_\_\_

PERMANENT ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

MY EMPLOYER IN BLACKSBURG WILL BE \_\_\_\_\_ POSITION \_\_\_\_\_  
BUSINESS ADDRESS \_\_\_\_\_  
PHONE NUMBER \_\_\_\_\_ SUPERVISOR \_\_\_\_\_ INCOME PER MONTH \_\_\_\_\_

**CRIMINAL HISTORY\*\***

1. Have you ever been convicted or pleaded guilty or "no contest" or have pending charges to a felony (whether or not resulting in a conviction)? \_\_\_\_\_  
2. Have you ever been convicted or pleaded guilty or "no contest" or have pending charges to a misdemeanor offense other than traffic violations (whether or not resulting in a conviction)? \_\_\_\_\_

**SPOUSE INFORMATION:**

SPOUSE'S NAME \_\_\_\_\_  
\_\_\_\_\_ (first) \_\_\_\_\_ (middle) \_\_\_\_\_ (last)  
SPOUSE'S SOCIAL SECURITY NUMBER \_\_\_\_\_ BIRTHDATE \_\_\_\_\_  
VEHICLE INFORMATION: MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ YEAR \_\_\_\_\_ COLOR \_\_\_\_\_ LICENSE \_\_\_\_\_  
PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

GIVE PAST TWO RESIDENCES:

1.) \_\_\_\_\_  
2.) \_\_\_\_\_

SPOUSE'S EMPLOYER IN BLACKSBURG WILL BE \_\_\_\_\_ POSITION \_\_\_\_\_  
BUSINESS ADDRESS \_\_\_\_\_  
PHONE NUMBER \_\_\_\_\_ SUPERVISOR \_\_\_\_\_ INCOME PER MONTH \_\_\_\_\_

**SPOUSE'S CRIMINAL HISTORY\*\***

1. Have you ever been convicted or pleaded guilty or "no contest" or have pending charges to a felony (whether or not resulting in a conviction)? \_\_\_\_\_  
2. Have you ever been convicted or pleaded guilty or "no contest" or have pending charges to a misdemeanor offense other than traffic violations (whether or not resulting in a conviction)? \_\_\_\_\_

**GUARANTOR (IF RESIDENT LACKS SUFFICIENT INCOME AND/OR CREDIT HISTORY)**

The guarantor must be at least 18 years of age, must permanently reside in the United States, and must consent to personal jurisdiction within the Commonwealth of Virginia.

NAME OF GUARANTOR \_\_\_\_\_ BIRTHDATE \_\_\_\_\_  
GUARANTOR'S ADDRESS (PO BOX AND STREET ADDRESS) \_\_\_\_\_  
TOWN, STATE, ZIP \_\_\_\_\_ COUNTY \_\_\_\_\_  
GUARANTOR'S SOCIAL SECURITY NO. \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_ RELATION TO RESIDENT \_\_\_\_\_  
EMAIL \_\_\_\_\_

GUARANTOR'S EMPLOYER \_\_\_\_\_  
POSITION \_\_\_\_\_  
BUSINESS ADDRESS \_\_\_\_\_  
PHONE NUMBER \_\_\_\_\_ SUPERVISOR \_\_\_\_\_

**Certification/Notification:** Applicant represents that all of the above statements are true and complete, and hereby authorizes verification of the above information, reference and credit records. In addition to the foregoing, applicant(s) has paid the sum of \$35 as a non-refundable fee for costs and expenses for processing of the application. Applicant acknowledges that false information herein may constitute grounds for refusal of the application, termination of right of occupancy and/or forfeiture of deposits and may constitute a criminal offense under the laws of the state. Furthermore, applicant understands that an investigative consumer report including information about personal character including criminal records may be made.

I authorize, without reservation, any party or agency contacted by HHHunt/Foxridge Apartment Homes to provide the above-mentioned information. I have read and agree to the provisions as stated.

This application is preliminary only and does not obligate the owner or owner's agent to execute a lease, deliver possession of the proposed premises or release keys.

IN CASE OF EMERGENCY, PLEASE NOTIFY (NAME) \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
RELATIONSHIP TO APPLICANT \_\_\_\_\_ EMAIL \_\_\_\_\_  
PHONE: HOME \_\_\_\_\_ WORK \_\_\_\_\_

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
SPOUSE'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_