

CASTLEMAN PROPERTY
109 Amherst Street, Winchester, VA 22601

NAME: _____ **SSN:** _____

CURRENT ADDRESS: _____

Phone Number: _____ **CELL No:** _____

Employer: _____ **Monthly Salary:** _____

Employment Address: _____

How Long Employed there? _____ **Employer's Phone No. :** _____

SPOUSE: _____ **SSN:** _____

Phone No: _____ **CELL No:** _____

Employer: _____ **Employer's Phone No.** _____

Employment Address: _____

How Long Employed there? _____ **Monthly Salary:** _____

Who will live in the home: (Give names, relationships) _____

References with phone numbers:

(1) _____

(2) _____

Current Landlord: _____

How Long living there: _____ **Phone Number:** _____

Have you been involved in a Court Order related to late rent payments: _____

CREDIT REFERENCES:

I certify that there will be no pets and no smokers in the house (This means no smokers, just smoking outdoors is not acceptable.

Signed: _____