

SIZE OF APARTMENT DESIRED: 1+1

DATE DESIRED: 18/06/2009

FOR OFFICE USE ONLY SECURITY DEPOSIT DATE PAID: _____ CHECK NO.: _____ RECEIPT NO.: _____	LANERN RIDGE APARTMENTS 401 FAIRFAX ROAD BLACKSBURG, VIRGINIA 24060	APT. NO.: _____ RENT: \$ _____ CARPET: _____ SIZE: _____ LEASE DATE: _____
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FULL NAME OF ALL OCCUPANTS	BIRTH DATE	RELATIONSHIP	SOCIAL SECURITY NUMBER
ORAL DALAY	26/02/1982		
SEHA GÜLNAZ DALAY	19/07/1984	SPOUSE	

PERSONAL REFERENCE: YONCA HACIHAHME TOĞLU PHONE: _____
 PERSONAL REFERENCE: _____ PHONE: _____

IF STUDENT, WHAT YEAR IN COLLEGE PRESENTLY? _____ WHAT DEPARTMENT? VIRGINIA BIOINFORMATICS INST.
 EMPLOYED BY: VIRGINIA TECH HOW LONG: 1 YEAR
 ADDRESS: _____
 POSITION: RESEARCH SCHOLAR SUPERVISOR: PROF. DR. BRUNO SOBRAL
 INCOME: 1800\$ PER: MONTH PHONE: 540-231-2100
 EMPLOYMENT OF SPOUSE: _____ HOW LONG: _____
 ADDRESS: _____
 POSITION: _____ SUPERVISOR: _____
 INCOME: _____ PER: _____ PHONE: _____

NUMBER OF VEHICLES: _____ LIST OTHER VEHICLES (TRAILERS, BOATS OR MOTORCYCLES): _____
 MAKE/MODEL: _____ YR: _____ COLOR: _____ STATE & TAG #: _____
 DO YOU HAVE RENTERS INSURANCE FOR PERSONAL BELONGINGS? _____
 IN CASE OF EMERGENCY, NOTIFY: _____ PHONE: _____
 ADDRESS: _____ RELATIONSHIP: _____
 NAME OF GUARANTOR (PARENT OR GUARDIAN - US CITIZEN) IF RESIDENT/APPLICANT IS UNDER 21 YEARS OF AGE AND/OR LACKS SUFFICIENT INCOME: _____
 GUARANTOR'S RELATIONSHIP TO RESIDENT/APPLICANT: _____
 GUARANTOR'S SOCIAL SECURITY NUMBER: _____ PHONE: _____
 GUARANTOR'S ADDRESS: _____ ZIP: _____
 NAME AND ADDRESS OF GUARANTOR'S EMPLOYER: _____
 DO YOU OWN A PET? YES ___ NO ___ IF YES, PLEASE DESCRIBE: _____

BANK NAME AND ADDRESS: _____
 ACCOUNT NO.: _____ ☒ CHECKING ☐ SAVINGS ☐ OTHER _____
 CREDIT REFERENCES: _____
 1. NAME AND PHONE NO.: _____ ACCOUNT NO.: _____
 2. NAME AND PHONE NO.: _____ ACCOUNT NO.: _____