

Tenant Placement Agreement

In exchange for payment as described below, Gribble Real Estate Services, Inc. (Broker) has the exclusive right to market for rent and lease the premises located at _____ (____ unit(s)). This Agreement is made and entered into the _____ day of _____, 20____, between _____ (Owner), and _Gribble Real Estate Services, Inc.____, (Broker).

Owner agrees to pay ONE MONTH'S RENT (MINIMUM \$750) for tenant placement services. Upon successful placement of tenant and lease signed by all parties, Broker will deposit tenant's funds and send Owner a check for amount received, minus placement fee.

Owner is not responsible for advertising or screening costs in conjunction with placement services. However, if Owner elects to advertise or screen over and above what Broker provides, owner will be responsible for those expenses. Broker will advertise Owner's property in various local and web based mediums (RentRockford.com and Craigslist etc...) which are subject to change based on performance of said mediums. When deemed necessary to rent property, Broker will recommend local newspaper advertising. Local newspaper advertising will be approved by and paid directly by the Owner. Rental applicant screening criteria to help determine eligibility may include credit, landlord, national criminal/eviction background checks, and employment verification as prescribed by Owner.

Owner and Broker acknowledge that it is illegal for either the Owner or the Broker to refuse to display or rent to any person because of one's membership in a protected class, e.g.; race, color, religion, national origin, ancestry, age, sex, sexual orientation, marital status, familial status, order of protection status, disability, military status, unfavorable discharge from military service, or any other class protected by the Illinois Human Rights Act.

In the event of any legal action by the parties arising out of this agreement, the prevailing party shall be entitled to reasonable attorney's fees and costs, to be determined by the court in which such action is brought.

This Agreement shall be effective as of the _____ day of _____, 20____, and shall expire on the _____ day of _____, 20____. If during the listing period the property is rented by Owner, the Broker, or anyone else produces a renter, ready, willing, and able to lease the property, Seller agrees to pay Broker as the listing agent the Tenant Placement fee mentioned above. If, within **180** days after the expiration or cancellation of this contract or any extensions thereof a the property is rented to any person to whom the property has been shown by the Owner, Broker or anyone else during the listing period, Owner agrees to pay Broker the Tenant Placement Fee, provided the premises is not listed with another licensed Broker

IN WITNESS WHEREOF, the parties hereto hereby execute this Agreement on the date first above written.

Owner

Owner

Agent

Broker

Owner/Property Details

Please answer the following questions to streamline prospective tenant questions.

Owner(s) or Business Name: _____

Home Phone # _____ **Cell Phone #** _____

Additional # _____ **Fax #** _____

Address: _____

E-mail: _____

| | |
|---|--|
| | Garage: <input type="checkbox"/> None <input type="checkbox"/> 1 Car <input type="checkbox"/> 2 Car <input type="checkbox"/> 3 Car Opener: <input type="checkbox"/> Yes <input type="checkbox"/> No #: _____ |
| Rental Address: | # spaces for off Street Parking: _____ # of Carport spaces: _____ |
| City: _____ State: _____ Zip: _____ | |
| | Laundry: <input type="checkbox"/> None <input type="checkbox"/> Coin <input type="checkbox"/> Hookups on main level/basement |
| Date Available: | Water Softener: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Rent Amount: | Stove: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Deposit Amount: | Refrigerator provided: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Lease Term: <input type="checkbox"/> 1 year <input type="checkbox"/> 6 month <input type="checkbox"/> M-T-M | Dishwasher: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Type: Duplex/Townhouse/House/Multi Unit # of units: _____ | Disposal: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Type: Upper / Lower Unit size: _____ sq. ft. | Microwave provided: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Living Room <input type="checkbox"/> yes <input type="checkbox"/> no Type of flooring _____ | Washer/Dryer provided: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Dining Room <input type="checkbox"/> yes <input type="checkbox"/> no Type of flooring _____ | Central air: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Family Room <input type="checkbox"/> yes <input type="checkbox"/> no Type of flooring _____ | Window air provided: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Kitchen <input type="checkbox"/> yes <input type="checkbox"/> no Type of flooring _____ | Fireplace: <input type="checkbox"/> None <input type="checkbox"/> Wood <input type="checkbox"/> Gas |
| # of Bedrooms _____ Type of flooring _____ | Deck: <input type="checkbox"/> Yes <input type="checkbox"/> No Fenced yard: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| # of Bathrooms _____ Type of flooring _____ | Pool: <input type="checkbox"/> Yes <input type="checkbox"/> No Whirlpool: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Security alarm: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Section 8: <input type="checkbox"/> Yes or <input type="checkbox"/> No / Smoking: <input type="checkbox"/> Yes or <input type="checkbox"/> No | Satellite Dish OK?: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Pets: Cats: <input type="checkbox"/> Yes <input type="checkbox"/> No Dogs: <input type="checkbox"/> Yes <input type="checkbox"/> No | Key location: _____ |
| Pet Deposit: _____ Extra \$/mo. for Pet: _____ | Lockbox: <input type="checkbox"/> Yes <input type="checkbox"/> No Combination: _____ |
| | Yard sign: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Garbage pick-up day: | Furnace filter size: _____ Change filters <input type="checkbox"/> Yes \$20.00 fee <input type="checkbox"/> No |
| Water meter location: | |
| <input type="checkbox"/> City water <input type="checkbox"/> City sewer <input type="checkbox"/> Septic sewer <input type="checkbox"/> Well water | Pre-payment requirements (check all that apply): <input type="checkbox"/> 1 st months rent <input type="checkbox"/> Last months rent <input type="checkbox"/> Security deposit |
| Services Provided By: T= Tenant O=Owner Gas: _____ Provider: _____ Avg. Mthly Bill: _____ Electric: _____ Provider: _____ Avg. Mthly Bill: _____ Heat: _____ Provider: _____ Avg. Mthly Bill: _____ Water: _____ Provider: _____ Avg. Mthly Bill: _____ Garbage: _____ Provider: _____ Avg. Mthly Bill: _____ Sewer: _____ Provider: _____ Avg. Mthly Bill: _____ Lawn Maintenance: _____ Provider: _____ Snow Removal: _____ Provider: _____ Association fees: _____ \$ _____/mo. | Driving directions _____ _____ _____ _____ |

*A separate Specification Sheet must be completed for each building

Comments: _____

Complete only if building built before 1978

DISCLOSURE OF INFORMATION ON LEAD BASED PAINT AND/OR LEAD-BASED PAINT HAZARDS

Lead Warning Statement

Housing built before 1978 may contain lead-based paint. Lead from paint, paint chips, and dust can pose health hazards if not managed properly. Lead exposure is especially harmful to young children and pregnant women. Before renting pre-1978 housing, lessor must also provide a federally approved pamphlet on lead poisoning prevention.

Lessor's Disclosure: Presence of lead-based paint and/or lead hazards (initial below):

X____ Known lead-based hazards are present in the housing (explain).

X____ Lessor has no knowledge of lead-based paint and/or lead-paint hazards in the housing.

Explain: _____

Records and reports available to the lessor (initial below):

X____ Lessor has provided the lessee with all available records and reports pertaining to the lead-based paint and/or lead-based hazards in the housing (list documents below).

X____ Lessor has no reports or records pertaining to lead-based records and reports pertaining to the lead-based paint and/or lead-based paint in the housing.

List: _____

Lessee's Acknowledgement (initial)

X____ Lessee has received copies of all information listed above and/or received the pamphlet PROTECT YOUR FAMILY FROM LEAD IN YOUR HOME.

Agents Acknowledgement (initial)

X____ Agent has informed the lessor of the lessor's obligations under 42 U. S. C. 4852d and is aware of his/her responsibility to ensure compliance

Certification of Accuracy

The following parties have reviewed the information above and certify, to the best of their knowledge, that the information they have provided is true and accurate.

| | | | |
|------------------|---------------|------------------|---------------|
| X_____ Lessee | _____ Date | X_____ Lessee | _____ Date |
| X_____ Lessee | _____ Date | X_____ Lessee | _____ Date |
| X_____ Agent | _____ Date | X_____ Lessor | _____ Date |

Property Address: _____

