



## WELCOME TO NORTHSTEPPE REALTY

Dear New Tenants,

On behalf of the entire staff here at NorthSteppe Realty, we would like to thank you for choosing to rent with us. We strive to provide you with superior service so that your renting experience is first-rate, and that you would choose to rent with us year after year.

We have included a welcome packet that provides helpful resources, answers to questions, and useful phone numbers. ***The first part of the packet has forms that must be completed before receiving a key to move into your apartment.*** They inform you of our rules and regulations and enable your move-in to go much more smoothly. The 2<sup>nd</sup> part of the packet, the last two pages, has two forms that you need to look over and complete within 5 days after you move into your apartment. This includes the Move-In Damages Sheet and Smoke Detectors/Fire Extinguishers Notice.

In order to get your keys for move in, you **MUST** have the following:

- Applications, with email addresses, completed and signed by ALL tenants
- The move-in packet filled out and signed completely by all the tenants
- All deposits and rent payments paid completely
- All leases must be signed with co-guarantors' notarized signatures
- Copy of Photo ID (State Issued ID with photo or Passport) for each tenant

**IMPORTANT NOTE:** When the time comes for you to move in, please be sure to call or email the office ([leasing@ohiostaterentals.com](mailto:leasing@ohiostaterentals.com)) 48 hours before you plan to arrive at the office to move in. Also, this would be the operative time to inquire as to whether your balance is current: you want to make sure you have paid everything ahead of time that needs to be paid (application fees, security deposit, last month's rent, etc.). Just as a reminder, if your lease starts between September 1 and September 15, your first month's rent is due September 1, 2009.

Please be sure to contact the appropriate utility companies (as mentioned in the Rules & Regulations) to be sure you will have gas, electric, cable, security systems, etc. working when you arrive. If you need exact meter numbers or have questions, please contact George at 614-299-4110, extension 109 or [george@ohiostaterentals.com](mailto:george@ohiostaterentals.com). For other issues, and questions, please refer to the list below:

- For questions regarding your lease contact our Leasing Office at 614-299-4110 or [leasing@ohiostaterentals.com](mailto:leasing@ohiostaterentals.com)
- For questions regarding charges or payment contact our Accounting office 614-299-4110 ext 110 or [Matt@OhioStateRentals.com](mailto:Matt@OhioStateRentals.com)
- For any maintenance issues contact our Maintenance Department at 614-299-4110 ext 2, or [kfishe17@gmail.com](mailto:kfishe17@gmail.com)
- For an emergency maintenance request, please call the pager at 614-617-0001
- When leaving a message for any of the above departments, please leave a detailed message along with your name, address, unit number, primary tenant and contact phone number.

*NorthSteppe Realty, Inc*

1944 N High St, Columbus, OH 43201, Office phone: (614) 299-4110, Office Fax (614) 474-1751  
[leasing@ohiostaterentals.com](mailto:leasing@ohiostaterentals.com)  
**OhioStateRentals.com**



**RENT PAYMENT NOTICE**

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

Tenant(s) are encouraged to pay their rent each month using ACH deduction. An ACH deductions (automatic clearing house) means that your checking or savings account will be deducted by our accounting department for your monthly rent. The ACH will be deducted on the 1<sup>st</sup> of each month, if the 1<sup>st</sup> falls on a weekend or holiday it will be deducted the next business day. [Click here to print an ACH form](#) (Adobe Acrobat Reader needed). Fill out and return completed signed form to NorthSteppe Accounting.

The ACH program is the only way each tenant in a multi tenant unit can pay separately without a multi check fee. This will also insure your rent is on time, as long as the ACH is not returned for insufficient funds. If you choose not to use the ACH Deduction then please comply with the following Rules:

1. Monthly payments must be paid in full in **one single check/money order** on or before the 1<sup>st</sup> of the month, every month including January 1<sup>st</sup>. We have a no grace period policy.
2. To ensure your rent is credited to the proper account, you must have the address, unit number, as well as primary tenant name on the face of the Check. Late fees or other charges may apply should you fail to provide us with the proper information.
3. Please place rent checks/money orders in the drop box located at 10 E 17<sup>th</sup> Ave. Just outside the Accounting office door. Do not give them to the leasing personnel or drop at the front desk.

Direct any questions to the NorthSteppe Realty Accounting office e-mail: [matt@ohiostaterentals.com](mailto:matt@ohiostaterentals.com)

***ALL ROOMMATES MUST SIGN***

_____ Resident	_____ Date	_____ Resident	_____ Date
_____ Resident	_____ Date	_____ Resident	_____ Date
_____ Resident	_____ Date	_____ Resident	_____ Date
_____ Resident	_____ Date	_____ Resident	_____ Date
_____ Resident	_____ Date	_____ Resident	_____ Date
_____ Resident	_____ Date	_____ Resident	_____ Date
_____ Resident	_____ Date	_____ Resident	_____ Date
_____ Resident	_____ Date	_____ Resident	_____ Date



**UTILITY COMPANIES AND CORRESPONDING BILLS**

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

As it indicates on my lease, I am responsible for paying certain utilities in my apartment, separately from my rent payment. (Please refer to your lease as to what your responsibilities are.) I further understand that if these utilities are not paid, I will be responsible for any and all implications that arise should the particular utility be shut off to my apartment/house. This would include, but not limited to hookup fees, replacement of appliances (if needed), and late fees issued by NorthSteppe Realty, Inc.

I agree to have the appropriate utilities placed in the name of one of the tenants at the above address by my/our move in date.

I agree that if I fail to place the appropriate utilities in one of the tenants' names by the aforementioned date, I/we will be assessed a \$50.00 charge for each month per account in which this has not been completed.

***ALL ROOMMATES MUST SIGN***

_____ Resident	_____ Date	_____ Resident	_____ Date
_____ Resident	_____ Date	_____ Resident	_____ Date
_____ Resident	_____ Date	_____ Resident	_____ Date
_____ Resident	_____ Date	_____ Resident	_____ Date
_____ Resident	_____ Date	_____ Resident	_____ Date
_____ Resident	_____ Date	_____ Resident	_____ Date
_____ Resident	_____ Date	_____ Resident	_____ Date

Questions regarding utilities can be directed to [george@ohiostaterentals.com](mailto:george@ohiostaterentals.com)

**AEP (electric) 800-277-2177 – [www.aepohio.com](http://www.aepohio.com)**

**Columbus Electric 614-645-7360 – [www.utilities.columbus.gov](http://www.utilities.columbus.gov)**

**Columbia Gas 800-344-4077 – [www.columbiagasohio.com](http://www.columbiagasohio.com)**



**WHAT HAPPENS WHEN ROOMMATES SPLIT?**

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

To live with a roommate is often a trying experience. Despite the obvious benefits of living with a roommate, the benefits frequently crumble, changing circumstances, which force roommates apart.

All roommates who have signed the lease agreement are entirely liable for any ill effects, which may follow, and the management has no obligation to terminate the lease due to a change in the circumstances. If one roommate chooses to move, he/she must sign off the lease, giving up all rights and responsibilities to the apartment. In the same respect, the remaining roommate(s) must sign assuming all responsibilities. Unless both parties do this, all parties are still held liable for the entire lease term. Management reserves the right to accept or reject any co-guarantors release of liability. Unless a written agreement is obtained from management in advance, no liability for the lease can be removed.

1. If one roommate pays one portion of the rent and the other roommates pay nothing, all residents are subject to the consequences on grounds of non-payment, all residents can be reported to the credit bureau for their non-payment and all residents can be evicted.
2. If a new roommate desires to move into the apartment while still on the existing lease, the existing tenants and management must approve him/her prior to moving, pay a new, security deposit, and sign a new lease.
3. When a roommate leaves prior to the lease term ending, the management has no obligation to refund his/her security deposit. The deposit is to stay with the apartment until completely vacated.
4. The security deposit agreement holds all parties liable for any and all damages, even if each resident has paid only part of the deposit.

***ALL ROOMMATES MUST SIGN***

_____	_____	_____	_____
Resident	Date	Resident	Date
_____	_____	_____	_____
Resident	Date	Resident	Date
_____	_____	_____	_____
Resident	Date	Resident	Date
_____	_____	_____	_____
Resident	Date	Resident	Date
_____	_____	_____	_____
Resident	Date	Resident	Date
_____	_____	_____	_____
Resident	Date	Resident	Date
_____	_____	_____	_____
Resident	Date	Resident	Date

# LEAD DISCLOSURE RENTAL

Property Address: \_\_\_\_\_ Company: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_ Company Address: \_\_\_\_\_  
MLS#: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

## 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, lessors must disclose the presence of known lead-based paint and/or lead-based paint hazards in the dwelling. Lessees must also receive a federally approved pamphlet on lead poisoning prevention.

### Lessor's Disclosure

(a) Presence of lead-based paint and/or lead-based paint hazards (check (i) or (ii) below):

(i) \_\_\_\_\_ Known lead-based paint and/or lead-based paint hazards are present in the housing (explain).

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

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

(b) Records and reports available to the lessor (check (i) or (ii) below):

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

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

(ii) \_\_\_\_\_ Lessor has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the housing.

### Lessee's Acknowledgment (Initial)

(c) \_\_\_\_\_ Lessee has received copies of all information listed above.

(d) \_\_\_\_\_ Lessee has received the pamphlet *Protect Your Family from Lead in Your Home*.

### Agent's Acknowledgment (Initial)

(e) \_\_\_\_\_ 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.

*Richard D. Goff* 4/2/08  
\_\_\_\_\_  
Lessor Date Lessor Date  
\_\_\_\_\_  
Lessee Date Lessee Date  
\_\_\_\_\_  
Agent Date Agent Date





These last 2 pages are to be completed within 5 days **AFTER** you move in.

**ACKNOWLEDGMENT OF SMOKE DETECTOR POLICY**

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

The undersigned resident(s) hereby acknowledges that, as of the above date, Smoke Detectors are installed at the above address in accordance with Columbus City Code Section 2521.10 and are in good working order. The undersigned agree not to tamper with or take any batteries from any Smoke Detectors and to notify Management immediately, in writing, of any malfunction or need for maintenance of any Smoke Detector.

Resident(s) also hereby acknowledge receipt and explanation of the materials stated above. Resident(s) agree to return apartment inspection form (Move in-Move out form) to the office within five business days after move in.

***ALL ROOMMATES MUST SIGN***

_____ Resident	_____ Date	_____ Resident	_____ Date
_____ Resident	_____ Date	_____ Resident	_____ Date
_____ Resident	_____ Date	_____ Resident	_____ Date
_____ Resident	_____ Date	_____ Resident	_____ Date
_____ Resident	_____ Date	_____ Resident	_____ Date
_____ Resident	_____ Date	_____ Resident	_____ Date
_____ Resident	_____ Date	_____ Resident	_____ Date
_____ Resident	_____ Date	_____ Resident	_____ Date

**MOVE IN DAMAGES SHEET**



1944 N High Street, Columbus, OH 43201 Office: 614-299-4110 Fax: 614-474-1751 Leasing@ohiostaterentals.com

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

Phone: \_\_\_\_\_

Kitchen	Check One			Comment	Bathroom 1	Check One			Comment
	Good	Fair	Poor			Good	Fair	Poor	
Oven/Range					Med. Cabinet				
Hood Fan					Vanity				
Dishwasher					Toilet				
Disposal					Tile/Caulking				
Refrigerator					Shower rod				
Sink/Faucet					Towel bar				
Cabinets					Sink				
Countertops					Shower/Tub				
Floor					Walls/Ceiling				
Walls					Fixtures/Bulbs				
Ceiling					Door(s)				
Other					Floor				
<b>Dining Room</b>					Mirror				
Windows					Linen Closet				
Drapes/Blinds									
Fixtures/Bulbs					Other				
Carpet/Floor					<b>Bathroom 2</b>				
Walls					Med. Cabinet				
Ceiling					Vanity				
<b>Living Room</b>					Toilet				
Floor/Carpet					Tile/Caulking				
Walls/Ceiling					Shower rod				
Drapes/Blinds					Towel bar				
Windows					Sink				
Doors/Screens					Shower/Tub				
Fireplace					Walls/Ceiling				
Ceiling Fans					Fixtures/Bulbs				
Bookshelves					Door(s)				
Outlets					Floor				
<b>Bedroom 1</b>					Mirror				
Floor/Carpet					Closet				
Walls									
Ceiling					<b>Items</b>	<b>Yes</b>	<b>No</b>	<b>None</b>	<b>Other</b>
Door(s)					Smoke detector				
Windows									
Mini Blinds					Fr. Door #keys				
Closet					Mail Box keys				
Other					Front door keys				
<b>Bedroom 2</b>					Laundry Keys				
Floor/Carpet					Furniture				
Walls					A/C window unit				
Ceiling					Portable heater				
Door(s)					Blinds				
Windows									
Mini Blinds					Other Notes:				
Closet									
Other									
<b>Bedroom 3</b>									
Floor/Carpet									
Walls									
Ceiling									
Door(s)									
Windows									
Mini Blinds									
Closet									
Other									

Tenant Signature: \_\_\_\_\_ Tenant Signature: \_\_\_\_\_  
 Tenant Signature: \_\_\_\_\_ Tenant Signature: \_\_\_\_\_  
 Tenant Signature: \_\_\_\_\_ Tenant Signature: \_\_\_\_\_  
 Tenant Signature: \_\_\_\_\_ Tenant Signature: \_\_\_\_\_  
 Tenant Signature: \_\_\_\_\_ Tenant Signature: \_\_\_\_\_

Date Returned to NorthSteppe \_\_\_\_\_