

Rental Application

PREPARED BY:

(Subject to Owners Approval)

		DATE	NUMBER
NAME OF APPLICANT		HOME PHONE	INITIAL IF OVER 18 YEARS OF AGE
PRESENT ADDRESS		DATES OF CURRENT OCCUPANCY:	FROM TO
CITY	STATE	ZIP CODE	AUTOMOBILE: MAKE/YEAR/REG. STATE & NO. SOCIAL SECURITY#
PRESENT LANDLORD		COMPLETE ADDRESS	PHONE NUMBER
FORMER LANDLORD		OCCUPANCY	COMPLETE ADDRESS PHONE NUMBER
CURRENT EMPLOYER		COMPLETE ADDRESS	PHONE NUMBER
OCCUPATION/SOURCE OF INCOME		TYPE OF BUSINESS	SALARY LENGTH OF EMPLOYMENT
FORMER EMPLOYER		LENGTH OF EMPLOYMENT	COMPLETE ADDRESS PHONE NUMBER
PERSONAL REFERENCE (NAME)		COMPLETE ADDRESS	PHONE NUMBER
IN CASE OF EMERGENCY NOTIFY (NAME)		COMPLETE ADDRESS	PHONE NUMBER
CREDIT REFERENCE		COMPLETE ADDRESS	PHONE NUMBER
BANK – CHECKING ACCOUNT		BRANCH ADDRESS	ACCOUNT NUMBER
BANK – SAVINGS ACCOUNT		BRANCH ADDRESS	ACCOUNT NUMBER

NAME OF ALL CO-TENANTS (EACH ADULT MUST FILE A SEPARATE APPLICATION)

APARTMENT NO./TYPE	TOTAL NO. OF OCCUPANTS	NO. OF ADULTS	NO. OF PETS	Base rent per month \$ _____ (Subject to escalation as set forth in lease)
ADDRESS	NAMES & AGES OF MINOR CHILDREN			Other Monthly Charges _____ (e.g. parking, etc.)
CITY	OCCUPANCY DATE	RENT BEGINS		Key/Lock _____
TERM OF LEASE (MONTHS)	FROM (DATE)	TO (DATE)		LastMonth's Rent _____
				Security Deposit _____
				Deposit on Account _____
				Balance Due _____
				Upon Acceptance _____

ARE YOU A CONVICTED FELON? (Y/N) _____ if "Yes" Please submit detail of conviction(s).

Base rent and other monthly charges are due and payable on the first day of each month in advance.

Pursuant to Massachusetts law, the Management shall not make any inquiry concerning race, religious creed, color, national origin, sex, sexual orientation, age, (except if a minor), ancestry or marital status of the Applicant or concerning the fact that the Applicant is a veteran or a member of the armed forces or is handicapped. The Applicant authorizes the Management and/or Renting Agency to obtain or cause to be prepared a consumer credit report relating to the Applicant.

Neither the Owner nor the Management is responsible for the loss of personal belongings caused by fire, theft, smoke, water or otherwise, unless caused by their negligence.

The undersigned warrants and represents that all statements herein are true and agrees to execute upon presentation a Rental Housing Association lease or Tenancy at Will agreement in the usual form, a copy of which the Applicant has received or has had occasion to examine, which lease or agreement may be terminated by the Lessor if any statement herein made is not true. Deposit is to be applied as shown above, or applied to actual damages sustained by the Owner, except it is to be refunded if said application is not accepted by the Owner. This application and deposit are taken subject to previous applications.

THIS APPLICATION MUST BE ACTED UPON BY THE OWNER ON OR BEFORE _____

The Renting Agent is an independent contractor and has no authority to make any representation concerning the premises; the Renting Agent is only authorized to show the apartment for rent and to assist in the screening of Rental Applicants.

Renting Agent..... Applicant Signature.....



Verification Request

APPLICANT AUTHORIZATION TO RELEASE INFORMATION

I (PLEASE PRINT NAME) _____ hereby authorize all third parties indicated on my application to furnish the information requested below to aaaaaaaaaaaaaaaaaaaaaaaaaa. I release all third parties, their officers, agents, and employees from any an all liability associated with such disclosure of the requested information.

Applicant's Signature: _____ Date: _____

RENTAL AGENT USE ONLY

_____ has applied for an apartment with out company and has listed you as a reference.

Please fill in the information requested below that applies to you and return to the attention of _____ via fax at aaaaaaaaaaaaaa.

Employment Verification

Position: _____

Is the employee full/part time, temporary/permanent: _____

Length of employment: _____

Weekly Gross Salary: _____

Your name and title: _____

Student Verification

Date of Graduation: _____

Graduate or Undergraduate: _____

Program enrolled in: _____

Your name and position: _____

Present Landlord Reference

Tenant's address: _____

Dates of occupancy: _____

Amount of occupancy: _____

Amount of rent: _____ Was paid on time: _____

Would you re-rent to this tenant: _____

Any Problems: _____

Your name and position: _____

Prepared By: _____ Agency: _____

(RENTAL AGENT)