

Rental Application

(Subject to Owners Approval)

DATE _____ NUMBER _____

NAME OF APPLICANT _____ PHONE *(Indicate home, work or cell)* _____ EMAIL ADDRESS _____ 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 _____

ADDRESS _____ NAMES & AGES OF MINOR CHILDREN _____

CITY _____ OCCUPANCY DATE _____ RENT BEGINS _____

TERM OF LEASE (MONTHS) _____ FROM (DATE) _____ TO (DATE) _____

Base rent per month \$ _____
 (Subject to escalation as set forth in lease)
 Other Monthly Charges _____
 (e.g. parking, etc.) _____
 Key/Lock _____
 Last Month'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.

Subject 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, gender identity, genetic information 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 _____

