

Rental Application

(Subject to Owners Approval)

NAME OF APPLICANT		HOME PHONE	DATE	NUMBER
PRESENT ADDRESS		DATES OF CURRENT OCCUPANCY:		INITIAL IF OVER 18 YEARS OF AGE
CITY	STATE	ZIP CODE	FROM	TO
PRESENT LANDLORD		COMPLETE ADDRESS	AUTOMOBILE: MAKE/YEAR/REG. STATE & NO.	
FORMER LANDLORD		OCCUPANCY	COMPLETE ADDRESS	PHONE NUMBER
CURRENT EMPLOYER		COMPLETE ADDRESS	SOCIAL SECURITY#	
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)	
ARE YOU A CONVICTED FELON? (Y/N) _____ if "Yes" Please submit detail of conviction(s).			

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 _____

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 _____

