

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.

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 _____

