

Rental Application

(Subject to Owners Approval)

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|------------------------------------|------------------|-----------------------------|--|------------------|
| NAME OF APPLICANT | | HOME PHONE | DATE | NUMBER |
| 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)

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|---|------------------------|---------------|--------------------------------|---|
| 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) | | Last Month's Rent _____ |
| ARE YOU A CONVICTED FELON? (Y/N) _____ if "Yes" Please submit detail of conviction(s). | | | | Security Deposit _____ |
| Base rent and other monthly charges are due and payable on the first day of each month in advance. | | | | Deposit on Account _____ |
| | | | | Balance Due _____ |
| | | | | Upon Acceptance _____ |

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.....