

THE ESTATES AT 231 MAIN

176 Main Street, Owego, NY 13827

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RENTAL APPLICATION

NOTE: Co-Applicant must complete a separate Rental Application Form.

The undersigned hereby makes application to rent unit number _____ located at _____
_____ Beginning on _____
at a monthly rental of \$ _____.

ABOUT YOURSELF

FULL NAME: _____ Phone No.: _____

Date of Birth: _____ Social Security No.: _____

Driver's License Number: _____ Name on License: _____

State: _____

CO-APPLICANT: _____ Relationship: _____

Phone No.: _____ Date of Birth: _____

Social Security No: _____ Driver's License Number: _____

Name on License: _____ State: _____

Name of All other occupants and relationship: _____

Email addresses: _____

Type of car or cars and license plate: _____

RESIDENCY HISTORY FOR THE PAST 3 YEARS

CURRENT ADDRESS: _____

Since (Month & Year): _____ Reason for Leaving: _____

Landlord: _____ Phone No.: _____

PRIOR ADDRESS (if within 3 years): _____

From (Month & Year): _____ to (Month & Year): _____

Reason for Leaving: _____

Landlord: _____ Phone No.: _____

EMPLOYMENT INFORMATION

STATUS:

Employed F/T _____ Employed P/T _____ Student _____ Retired _____ Unemployed _____

CURRENT EMPLOYER (or most recent): _____

Address: _____

Phone No.: _____ **From:** _____ **To:** _____

Position: _____ **Supervisor's Name:** _____

Gross Mnthly Salary: _____ **Household Gross Monthly Income:** _____

PREVIOUS EMPLOYER: _____

Address: _____

Phone No.: _____ **From:** _____ **To:** _____

Position: _____ **Supervisor's Name:** _____

Gross Mnthly Salary: _____ **Household Gross Monthly Income:** _____

STATUS: CO-APPLICANT:

Employed F/T _____ Employed P/T _____ Student _____ Retired _____ Unemployed _____

CURRENT EMPLOYER (or most recent): _____

Address: _____

Phone No.: _____ **From:** _____ **To:** _____

Position: _____ **Supervisor's Name:** _____

Gross Monthly Salary: _____ **Household Gross Monthly Income:** _____

PREVIOUS EMPLOYER: _____

Address: _____

Phone No.: _____ **From:** _____ **To:** _____

Position: _____ **Supervisor's Name:** _____

Gross Monthly Salary: _____ **Household Gross Monthly Income:** _____

If there are any other sources of income you would like us to consider, please list income, source, and person who we could contact for confirmation: _____

HAVE YOU OR YOUR CO-APPLICANT EVER:

Been sued for non-payment of rent: Yes _____ No _____

Been evicted or asked to move out: Yes _____ No _____

Broken a rental agreement or lease: Yes _____ No _____

Been sued for damage to rental property: Yes _____ No _____

Declared Bankruptcy: Yes _____ No _____

Do you have a criminal background: Yes _____ No _____

Is there any additional information that might help us evaluate your application: _____

In case we have any questions regarding your application, please provide a phone number where you can be reached: Day No.: _____ Evening No.: _____

EMERGENCY CONTACT INFORMATION

Contact Name: _____ Relationship: _____

Address: _____

Home Phone No.: _____ Work Phone No: _____

I hereby apply to lease the above-described premises for the term and upon the conditions above set forth and agree that the rental is to be payable in advanced the 1ST day of each month. I warrant that all statements above set forth are true; Application fee: \$ 20.00 per person \$40.00 for a couple.

I hereby deposit \$ _____ (Security deposit) as earnest money to be refunded to me if this application is not approved. Upon acceptance of this application, this deposit shall be retained as part of the security deposit. When so approved and accepted I agree to execute a lease for _____ Months before possession is given, and to pay the balance of the security deposit after being notified of acceptance or the deposit will be forfeited as liquidated damages in payment for the agent's time and effort in processing my inquiry and application, including making necessary investigation of my credit, character, and reputation. If this application is not approved and accepted by the owner or agent, the deposit will be refunded, the applicant thereby waiving any claim for damages by reason of non-acceptance.

I AUTHORIZE MANAGEMENT TO CONTACT PREVIOUS LANDLORD(S), CREDIT, AND PERSONAL REFERENCES THAT I HAVE GIVEN IN THIS APPLICATION, AND TO OBTAIN MY CONSUMER CREDIT REPORT.

Applicant's Signature: _____ Date: _____

Co-Applicant's Signature: _____ Date: _____

FOR OFFICE USE ONLY

Payment of \$ _____ Received by: _____ Date: _____

Application Form Received by: _____ Date: _____

REFERENCE NAME AND PHONE NUMBER	DATE CONTACTED	COMMENTS

APPLICATION Approved _____ Not Approved _____

If not approved, reason: _____

Applicant Notified by: _____ Date: _____