

Apartment Rental Application

Rental of this unit is subject to criminal background, credit and reference verification, thank you for your interest in renting this unit. An application must be filled out by each occupant. all information provided on this application will be verified and takes several days to process.

The undersigned hereby makes application to rent the unit located at 10 Shirley Avenue, Cheektowaga, NY 14225

Beginning _____, and ending _____, at a monthly rental amount of \$975 _____.

Personal Information

Applicant's Full Name: _____ Day Phone: _____

Date of Birth: _____ Social Security Number: _____

Do you have a Co-Applicant who is not your spouse or family member?: Yes No

If yes, Co-Applicant's Name(s) _____

If married, Spouse's Full Name: _____

Date of Birth: _____ Social Security Number: _____

Number of Dependents: _____ Dependent(s) Name(s) and Age(s): _____

Name, Address, and Phone Number for Emergency Contact (person not living in unit) : _____

Your Student Number: _____ School: _____

Your Driver's License Number: _____ State: _____

If married, Spouse's Driver's License Number: _____ State: _____

Your Vehicle Make/Model: _____ Year: _____ License Plate: _____

Second Vehicle Make/Model: _____ Year: _____ License Plate: _____

Financial Information

If there are other sources of income you would like us to consider, or you are unemployed, please list income, source and person (banker, employer, social security, housing assistance, etc.) whom we could contact for confirmation. Please provide management with printed proof of any assistance of Social Security, Veteran's Benefits, and the like. You do not have to reveal alimony, child support or spouse's annual income unless you want it considered on this application.

Amount(s): \$ _____ Source(s): _____

Amount(s): \$ _____ Source(s): _____

Character Information

Have you ever:

1. Been evicted from tenancy? No Yes If yes, when: _____

2. Been convicted of a felony? No Yes If yes, explain:

Please give any additional information that might help management evaluate this application. _____

If management has any questions about this application, please give phone numbers where you can be reached:

Day Phone: _____ **Night Phone:** _____

If you are an undergraduate student or rely on your parents for financial assistance to pay your rent, you must give their name(s) and information. They will be required to sign a guaranty agreement. As such, a consumer credit report will be obtained on them.

Name(s): _____

Social Security Number(s): _____

Address: _____ City & State: _____ Zip: _____

Daytime Phone Number: _____ Evening Phone Number: _____

PLEASE READ & SIGN

I/We hereby apply to rent the above described premises for the term and upon the conditions above set forth and agree that the rental amount is to be payable the first day of each month in advance. **I/We warrant that all statements above set forth are true, however, should any statement made above be a misrepresentation or not a true statement of facts, \$100.00 of the deposit will be retained to offset the cost, time and effort in processing this application and the application will be denied.**

Any such misrepresentation or false statement will constitute a default under the lease and will entitle lessor to termination of the lease if such misrepresentation or false statement is not discovered by lessor until after parties enter into the lease. This paragraph shall be incorporated into any lease entered into between lessor and lessee.

I/We recognize as part of your procedure for processing this application, an investigative consumer report may be prepared whereby information is obtained through a computer-generated credit report as well as personal interviews with employers, current and previous landlords and others with whom I/we may be acquainted. This inquiry includes information as to character, general reputation, personal characteristics and mode of living. I/We understand that I/we may have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation.

I/We recognize as part of your procedure for processing this application, an investigate criminal background check may be done on local, state & national levels.

The above information, to the best of my knowledge, is true and correct.

Signature of applicant(s):

_____ Date: _____

_____ Date: _____

Personal References:

Name: _____ Phone: _____ Relationship _____

Name: _____ Phone: _____ Relationship _____

Name: _____ Phone: _____ Relationship _____

All information on this application is strictly confidential, if application is not accepted all documents relating to this application will be destroyed.

*Once this application is reviewed and accepted, a link will be provided online to submit a background/credit check through TurboTenant.com. A small fee is required through TurboTenant and is not refundable. It is important that all the information provided is truthful. Keep in mind there are several applications being reviewed at this time and filling out the application does not guarantee acceptance. **Applications without a valid return address will not be accepted.***
