



Rental Application

(Subject to Owner's Approval)

NAME OF APPLICANT			HOME PHONE	INITIAL IF OVER 18 YEARS OF AGE
PRESENT ADDRESS			DATE OF CURRENT OCCUPANCY:	FROM: TO:
CITY	STATE	ZIP CODE	AUTOMOBILE: MAKE/YEAR/REG. STATE AND NO.	SOCIAL SECURITY NUMBER
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
EMERGENCY CONTACT (NAME)		COMPLETE ADDRESS		PHONE NUMBER
NAME(S) OF CO-TENANT(S) (EACH ADULT MUST FILE A SEPARATE APPLICATION)				

APARTMENT NO./TYPE	TOTAL NO. OF OCCUPANTS	NO. OF ADULTS	NO. OF PETS	NAMES & AGES OF MINORS
ADDRESS		CITY		

OCCUPANCY DATE	RENT BEGINS	TERM OF LEASE (MONTHS)	FROM (DATE)	TO (DATE)
ARE YOU A CONVICTED FELON? (Y/N)		IF "YES," PLEASE SUBMIT DETAILS 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.

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.

BASE RENT PER MONTH	_____
(subject to change as set forth in lease)	
OTHER MONTHLY CHARGES	_____
(e.g. parking, etc.)	
KEY/LOCK	_____
LAST MONTH'S RENT	_____
SECURITY DEPOSIT	_____
DEPOSIT ON ACCOUNT	_____
DEPOSIT DUE UPON ACCEPTANCE	_____

THIS APPLICATION MUST BE ACTED UPON BY THE OWNER ON OR BEFORE:

 Renting Agent Signature

