

## RENTAL APPLICATION

Each adult, 18 or older, must fill out a separate application. Before applications can be processed, they must be complete; the information that you and others in your group report must meet our rental criteria; and a small fee per applicant must be paid. See "Terms and Conditions" on page 3. *Please print clearly.*

NAME-LAST \_\_\_\_\_ FIRST \_\_\_\_\_ MI \_\_\_\_\_  
 If you've used any other name(s) in the past, please write them here:

BIRTH DATE \_\_\_\_\_ SOC. SEC. NO. \_\_\_\_\_ DRIVER'S LICENSE # \_\_\_\_\_  
 INDIVIDUAL TAXPAYER ID NO. (ITIN, if applicable) \_\_\_\_\_  
 HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_  
 MARRIED  STUDENT  DIVORCED  SEPARATED  RETIRED  SINGLE

SPOUSE'S NAME \_\_\_\_\_ BIRTH DATE \_\_\_\_\_  
 SOC. SEC. NO. \_\_\_\_\_ ITIN (if applicable) \_\_\_\_\_  
 SPOUSE'S WORK PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

All Other Proposed Occupants	Age	Relationship To Applicant

### RENTAL/RESIDENCE HISTORY

	Current Residence	Previous Residence
Street Address		
City		
State & Zip		
Last Rent Amount Paid		
Owner/Manager And Phone Number		
Reason for leaving		
Is/was rent paid in full?		
Did you give notice?		
Were you asked to move?		
Name(s) in which your utilities are now billed:		
	From/To	From/To
Dates of Residency		

### EMPLOYMENT HISTORY

	Current Employment	Previous Employment	Prior Employment
Employed By			
Address			
Employer's Phone			
Occupation			
Name of Supervisor			
Monthly Gross Pay			
	From/To	From/To	From/To
Dates of Employment			



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**CREDIT HISTORY**

	Bank/Institution Name(s)	Balance On Deposit or Balance Owed
Savings Account		
Checking Account		
Credit Card(s)		
Auto Loan(s)		

**RECURRING MONTHLY PAYMENTS (DOLLARS PER MONTH):**

Car \$	Car \$	Loan \$
Loan \$	Loan \$	Loan \$
MasterCard \$	Visa \$	Discover \$
American Express \$	Doctor \$	Dentist \$
Lawyer \$	Hospital \$	Store \$
Store \$	Store \$	Store \$
Alimony \$	Child Support \$	Other \$

**CLOSED ACCOUNT INFORMATION**

- Do you have any closed accounts with remaining balances?  yes/  no
- Please state approximate remaining balance for each closed account:  
\$ \_\_\_\_\_, \$ \_\_\_\_\_, \$ \_\_\_\_\_, \$ \_\_\_\_\_, \$ \_\_\_\_\_, \$ \_\_\_\_\_, \$ \_\_\_\_\_
- Are you paying off the remaining balances?  yes  no. If "yes", how much per month?  
\$ \_\_\_\_\_, \$ \_\_\_\_\_, \$ \_\_\_\_\_, \$ \_\_\_\_\_, \$ \_\_\_\_\_, \$ \_\_\_\_\_, \$ \_\_\_\_\_
- Have any of your accounts ever gone to collection?  yes  no. If "yes", how many accounts: \_\_\_\_\_

**VEHICLES (Include vehicles belonging to other proposed occupants also)**

Make	Model	Color	Year	License Plate

What is the name of your auto insurance company? \_\_\_\_\_

**REFERENCES & EMERGENCY CONTACTS**

	Doctor	Lawyer	Nearest Relative Living Elsewhere
Name			
Street Address			
City			
State & Zip			
Phone Number			

By signing the application you grant us permission to communicate with all the contacts listed in this section in the event we can't locate you. Furthermore, if you abandon the apartment for any reason then you grant us permission to allow your relative listed above to remove all contents of the dwelling on your behalf.

**GENERAL INFORMATION**

- Have you ever been served a late rent notice? \_\_\_\_\_
- Do any of the people who would be living in the apartment smoke? \_\_\_\_\_
- How long do you think you would be renting from us? \_\_\_\_\_
- Have you ever filed for bankruptcy?  If so, when? \_\_\_\_\_ Chapter 7 or 13 \_\_\_\_\_  
Are you paying off some or all debt over a period of time? \_\_\_\_\_
- Have you ever been convicted of or pleaded guilty or "no contest" to a felony (whether or not resulting in a conviction)?  yes  no
- Have you ever been convicted of or pleaded guilty or "no contest" to a misdemeanor involving sexual misconduct (whether or not resulting in a conviction)?  yes  no
- Are you an illegal immigrant, involved in money laundering, a known or suspected foreign agent, a member of a front or terrorist organization, a terrorist, or a narcotics trafficker?  yes  no



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- 8. Is your name on the Specially Designated Nationals and Blocked Persons (SDN) list? \_\_\_\_ yes  
\_\_\_\_ no. (The SDN list may be found at [www.treas.gov/offices/enforcement/ofac/](http://www.treas.gov/offices/enforcement/ofac/).)
- 9. Have you ever been served an eviction notice? \_\_\_\_ If so, when? \_\_\_\_\_  
What was the reason? \_\_\_\_\_
- 10. How many pets do you have (list type, breed, approx. weight & age: \_\_\_\_\_
- 11. Have you had any recurring problems with your current apartment or landlord? If yes, please explain: \_\_\_\_\_
- 12. Why are you moving from your current address? \_\_\_\_\_
- 13. List any verifiable sources and amounts of income you wish to have considered (optional): \_\_\_\_\_
- 14. If you were to run into financial difficulty in the future and couldn't come up with the money to pay the rent, do you know someone who would loan you the money? If so, provide the person's name, address & phone # so that we can use them as a reference for you. \_\_\_\_\_
- 15. Have you been a party to a lawsuit in the past? If yes, please explain why: \_\_\_\_\_
- 16. We may run a credit check and a criminal background check. Is there anything negative we will find that you want to comment on? \_\_\_\_\_
- 14. What is the highest level of education you have completed? \_\_\_\_\_
- 15. When would you be able to move in? \_\_\_\_\_
- 14. Do you plan to take out Renter's insurance? \_\_\_\_\_
- 15. Other pertinent information: \_\_\_\_\_
- 16. How did you hear about this apartment? \_\_\_\_\_
- 17. Do you have an e-mail address where we can reach you? \_\_\_\_\_
- 18. Do you know of anybody else looking for an apartment? Please provide their name and number.  
If you refer a friend and you each end up renting separate apartments from us, then we will pay you a referral reward.

TERMS AND CONDITIONS OF RENTAL APPLICATION

THE UNDERSIGNED APPLICANT ACKNOWLEDGES AND AGREES TO THE FOLLOWING:  
APPLICATION FEE: Because it costs us time and money to do a thorough check of your application, there is a ~~\$25~~ processing fee for each adult applicant or co-signer.

APPLICANT'S OBLIGATION: Applicant understands that this is an application for an apartment and does not constitute a rental or lease agreement in whole or part. If the applicant is approved and becomes a tenant, upon vacating the rental premises applicant agrees to reimburse the Owner for any losses sustained by the Owner (a) due to the applicant's failure to satisfy the terms of the Lease Agreement, (b) resulting from damage or cleaning charges caused by the applicant, and (c) where the rental premises are not cleaned or repaired in accordance with the Move-in Inspection report.

CERTIFICATION: The undersigned applicant (or co-signer) certifies all the information provided is true, accurate and complete as of below date. For the purpose of procuring credit in relation to the proposed apartment lease, applicant authorizes a credit and/or criminal check to be made, verification of information provided and communication with any and all names listed on this application. Also, applicant understands that, if approved, the information and terms of the application become a part of the lease for the rental premises, and any misrepresentation made herein shall be grounds for termination of the lease at the Owner's option.

I certify that I have read, understand, and agree to all the above terms and conditions.

Signature: \_\_\_\_\_  
\_\_\_\_ Applicant \_\_\_\_ Co-signer

Date: \_\_\_\_\_



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**PERMISSION TO RELEASE TENANT HISTORY INFORMATION**

Date: \_\_\_\_\_

To: \_\_\_\_\_  
(current or former housing provider)

\_\_\_\_\_  
street address town/city state

I have completed a Rental Application for Apartment No. \_\_\_\_\_ at

\_\_\_\_\_, Maine.  
street address town/city

The owner and/or property manager of the apartment rental unit is

\_\_\_\_\_ of  
\_\_\_\_\_, Maine.  
street address town/city

To facilitate the screening process, I give you my permission to disclose my tenant history information to the above housing provider. He/she has assured me that the information that you provide will be used solely in connection with rental screening for the above apartment and that all information in the report will be kept in strict confidence and shall not be distributed directly or indirectly to any third parties.

\_\_\_\_\_  
Signature of applicant

