



STONINGTON FARM

A P A R T M E N T S

APPLICATION FOR RENTAL

Notice: All adult applicants (18 or older) must complete a separate application for rental.

Apartment	Rent	Move In Date	Agent
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APPLICANT INFORMATION

Last Name First Name MI.

SSN Government Issued ID #	Cell Phone
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Birth Date	Home Phone	Work Phone	Email
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Street Address City State Zip

Date In	Date Out	Landlord Name	Landlord Phone
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Monthly	Reason for Leaving
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PREVIOUS ADDRESS

Street Address City State Zip

Date In	Date Out	Landlord Name	Landlord Phone
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Monthly	Reason for Leaving
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OTHER OCCUPANTS/RESIDENTS

List Names and Date of Birth of all Additional occupants/residents:

1. Occupation Employer/Company/Address Monthly Salary

Supervisor Name	Supervisor Phone	Start Date	End Date
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2. Occupation Employer/Company/Address Monthly Salary

Supervisor Name	Supervisor Phone	Start Date	End Date
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1. Other Income Description Monthly Income

2. Other Income Description Monthly Income

EMERGENCY CONTACT

1. Name	Address	Phone
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2. Name	Address	Phone
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STONINGTON FARM
APARTMENTS

BACKGROUND INFORMATION

Have you ever been convicted and/or arrested for a crime?	
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If so, please list and explain the nature of the crime:

Have you ever been evicted by a Landlord?

If so, please list and explain the nature of the eviction:

Any Litigation, such as Suits, Judgments, Bankruptcies, Foreclosures, etc.?

If so, please list and explain the nature of the litigation:

VEHICLE INFORMATION

1. Make & Model & Color	Year	License No. & State
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2. Make & Model & Color	Year	License No. & State
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Other Vehicles	
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OTHER INFORMATION

How did you hear about this Property?	
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Please include any other information you believe would help to evaluate this application:

I/We hereby agree, in the event of the approval of this application, to execute a lease in accordance with the terms set forth in the rental application. If I/We fail to cancel this application, fail to sign the lease or pay agreed rental, security deposit, or other required charges and fees of \$40.00 application fee and \$500.00 holding deposit shown in this rental application within twenty-four (24) hours from the date of this application, the deposit accompanying this application, and any monies subsequently paid, shall be forfeited to the owner as fixed and liquidated damages. Owner and/or agent for the owner reserve the right to reject this application and to refuse possession of the above mentioned accommodations. I/We have read the foregoing and certify the information herein is TRUE and CORRECT, that this application is submitted for the purpose of inducing approval of this application in my/our behalf. This is to inform you that as a part of our procedure for processing your application, an investigative Consumer Report may be prepared whereby information is obtained through credit report(s), personal interviews with your landlord, employer, or others with whom you are acquainted. This inquiry includes information as to your character, general reputation, personal characteristics, and mode of living. You 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 hereby consent for you to process our application through Weimark to obtain and verify my credit information, including a criminal background check for the purpose of determining whether or not to lease to me an apartment. I/We understand that if our name(s) appear on the register of sex offenders this application will be rejected. I/We understand that should I lease an apartment, you shall have a continuing right to review my credit information, rental application, criminal background, payment history and occupancy history for account review purposes and for improving application methods.

Applicant Signature	Date Signed
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Applicant was (circle one):	Approved	Conditionally Approved	Declined
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Leasing Director has reviewed application and all documents provided

Leasing Director Signature	Date Reviewed
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