Rental Application

(Subject to Owners Approval)

| | | (| | ποιογιβρίοναι | DATE | NUMBER | |
|---------------------------------------|---|--------------------------------|--|---|--|--|--|
| NAME OF APPLICANT | | HOME PHONE | | | INITIAL IF OVER 18 YEARS OF AGE | | |
| PRESENT ADDRESS | | | DATES OF CUR | RRENT OCCUPANCY: | FROM | ТО | |
| CITY | STATE | ZIP CODE | AUTOMOBILE: | MAKE/YEAR/REG. STATE 8 | & NO. SOCIA | L SECURITY# | |
| PRESENT LAND | LORD | COMPLETE | ADDRESS | | PHONE | E NUMBER | |
| FORMER LANDLORD | | OCCUPANCY | | COMPLETE ADDRESS | PHONE | 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 REF | ERENCE (NAME) | COMPLETE | ADDRESS | | PHONE | E NUMBER | |
| IN CASE OF EME | ERGENCY NOTIFY (NAME) | COMPLETE | ADDRESS | | PHONE | E NUMBER | |
| CREDIT REFERE | ENCE | COMPLETE | ADDRESS | | PHONE | E NUMBER | |
| BANK – CHECKI | NG ACCOUNT | BRANCH AI | DDRESS | | ACCOL | JNT NUMBER | |
| BANK – SAVING | S ACCOUNT | BRANCH AL | DDRESS | | ACCOL | JNT NUMBER | |
| NAME OF ALL C | O-TENANTS (EACH ADULT | MUST FILE | A SEPARATE APPL | ICATION) | | | |
| APARTMENT NO./TYPE TOTAL NO. OF OC | | CCUPANTS NO. OF ADULTS 1 | | NO. OF PETS | Base rent per month \$ | | |
| ADDRESS | | NAMES & AGES OF MINOR CHILDREN | | (e.g. parking, et | | | |
| CITY | | OCCUPANO | CY DATE | RENT BEGINS | Key/Lock_ Last Month's Ro Security Deposit | | |
| TERM OF LEASE | (MONTHS) | FROM (DAT | E) | TO (DATE) | Deposit on Acco | ount | |
| | IVICTED FELON? (Y/N) | | | ` ' | | ce | |
| Pursuant to Mass (except if a mino | r), ancestry or marital status | ent shall not i | make any inquiry co cant or concerning | ncerning race, religious cree the fact that the Applicant is | d, color, national of a veteran or a r | origin, sex, sexual orientation, age, member of the armed forces or is sumer credit report relating to the | |
| • • | r nor the Management is resp | oonsible for th | ne loss of personal b | elongings caused by fire, the | ft, smoke, water o | r otherwise, unless caused by their | |
| Tenancy at Will a terminated by the | greement in the usual form, | a copy of whin made is not | nich the Applicant ha t true. Deposit is to b | as received or has had occa be applied as shown above, o | sion to examine, or applied to actual | ental Housing Association lease or which lease or agreement may be damages sustained by the Owner, previous applications. | |
| THIS APPLICATION | I MUST BE ACTED UPON BY TH | E OWNER ON | OR BEFORE | | | | |
| The Renting Ager to show the apart | nt is an independent contract ment for rent and to assist in | or and has no the screenin | authority to make a ng of Rental Applica | any representation concernin nts. | g the premises; th | e Renting Agent is only authorized | |
| Renting Agent | | | | Applicant Signature | | | |

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