

HISTORICAL SQUARE & RIDGEVIEW AT LEWISTON

RENTAL APPLICATION

Notice: All persons 18 and over must fill out a rental application

A \$25.00 non-refundable fee per U.S. applicant and \$45.00 fee for Canadian Resident (U.S. Funds) must be submitted with your application.

PLEASE TELL US ABOUT YOURSELF

TENANT #1:

FULL NAME _____

Phone Number _____

Date of Birth: _____

Social Security No. _____

Driver's License No. & State _____

Email address: _____

TENANT #2:

FULL NAME _____

Phone Number _____

Date of Birth: _____

Social Security No. _____

Driver's Lic. No. & State _____

Email address: _____

Please list everyone, including yourself who will be occupying the apartment:

Have you or co-applicant ever been known as another name? If yes please list names

YOUR RESIDENCE HISTORY FOR THE PAST 3 YEARS (Beginning With Most Current)

TENANT #1

CURRENT ADDRESS _____

Month & Year Moved In _____

Reason for Leaving _____

Owner or Agent _____

Landlord's Phone Number () _____

Monthly Payment \$ _____

PREVIOUS ADDRESS (If within 3 years)

Month & Year Moved In _____ Moved Out _____

Reason for Leaving _____

Owner or Agent _____

Landlord's Phone Number () _____

TENANT #2:

CURRENT ADDRESS _____
Month & Year Moved In _____
Reason for Leaving _____
Owner or Agent _____
Landlord's Phone Number () _____
Monthly Payment \$ _____

PREVIOUS ADDRESS (If within 3 years)

Month & Year Moved In _____ Moved Out _____
Reason for Leaving _____
Owner or Agent _____
Landlord's Phone Number () _____

YOUR EMPLOYMENT INFORMATION

TENANT #1

YOUR STATUS: Employed Full-Time Employed Part-Time Student Retired Not Employed

CURRENT EMPLOYER (Or Most Recent) _____
Address _____
Phone () _____
Date(s) Employed / From _____ To _____
Position _____
Supervisor _____ Your Gross Annual Salary \$ _____
Additional Monthly Income \$ _____

PREVIOUS EMPLOYER _____ Phone _____
Address _____
From _____ To _____ Position _____
Supervisor _____

TENANT #2:

YOUR STATUS: Employed Full-Time Employed Part-Time Student Retired Not Employed

CURRENT EMPLOYER (Or Most Recent) _____
Address _____
Phone () _____
Date(s) Employed / From _____ To _____
Position _____
Supervisor _____ Your Gross Annual Salary \$ _____
Additional Monthly Income \$ _____

PREVIOUS EMPLOYER _____ Phone _____
Address _____
From _____ To _____ Position _____
Supervisor _____

If there are other sources of income you would like us to consider, please list income, source and person (Banker, Employer, etc.) who we could contact for confirmation. You do NOT have to reveal alimony, child support or spouse's annual income unless you want us to consider it in this application.

Amount \$ _____ Source _____
Income Verification Required

PLEASE LIST YOUR BANK AND CREDIT REFERENCES

YOUR BANK(S)	City-State/Branch	Telephone
1		
2		

TOTAL NUMBER OF VEHICLES (Including Company Vehicles) Maximum of 1 vehicle per driver

Make/Model _____ Year _____ Color _____

Plate No./State _____

Make/Model _____ Year _____ Color _____

Plate No./State _____

HAVE YOU OR CO-APPLICANT EVER IN ANY STATE IN THE UNITED STATES:

Been sued for non-payment of rent? Yes No

Been evicted or asked to move out? Yes No Broken a Rental Agreement or Lease? Yes No Been sued for damage to property? Yes No Declared Bankruptcy? Yes No

Ever been convicted of a felony? If yes please provide conviction information and date of conviction.

Ever been convicted of any drug related crime? Yes No If yes please provide conviction information and date of conviction. _____

EMERGENCY CONTACTS:

Name: _____ Relationship _____ Phone: _____ E-mail: _____

Name: _____ Relationship _____ Phone: _____ E-mail: _____

Name: _____ Relationship _____ Phone: _____ E-mail: _____

Upon acceptance of this application, I will have five (5) business days to submit a NON-REFUNDABLE Security Deposit in the form of a check or money order, equal to one month's rent. If I fail to execute a 12 month lease for the above described premises, within five business days after approval of Lease by Legacy at Lewiston, the Security Deposit will be forfeited as liquidated damages in payment for the Agent's time and effort in processing my inquiry and application as well as lost marketing time.

I hereby apply to lease the above described premises for the term and upon the conditions above set forth and agree that the rental is to be payable the 1st day of each month. As an inducement to the owner of the property or his agent to accept this application, I warrant that all statements above set forth are true; however, should any statement made above be a misrepresentation or not a true statement of fact the owner or his agent may reject, without stating any reason for so doing, the applicant, thereby waiving any claim for damages by reason of non-acceptance. I hereby deposit a NON-REFUNDABLE application fee in the amount of \$25.00 per U.S. applicant and \$45.00 per Canadian resident.

I consent to allow Legacy at Lewiston through its agents and employees to obtain and verify my credit information, criminal history, investigate consumer report, employment, income and landlord references, for the sole purpose of determining whether or not to lease me an apartment. I understand that should I lease an apartment, Legacy at Lewiston shall have a continuing right to review those items in addition to my residency information from any source and may exchange credit information with consumer reporting agencies. I also affirm that this application is true and accurate. I understand that if the above information provided proves false, it will be deemed an event of default under any such lease, or renewal and Legacy at Lewiston may cancel and annul any lease given in reliance upon such information.

TENANT #1 SIGNATURE:

Date: _____

TENANT #2 SIGNATURE:

Date: _____

MANAGER/AGENT SIGNATURE:

OFFICE USE ONLY

APPROVED: _____ APPROVED, ONLY WITH A GUARANTOR: _____

DATE: _____

DECLINED: _____

APT./BLDG: _____ MONTHLY RENT: _____ ADDED FEES: _____

TERM OF LEASE: _____ MOVE IN DATE: _____