

# Rental Application

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**Instructions:**

1. Complete application in its entirety. Do not leave any sections blank. For items that do not apply, enter 'N/A'.
2. An application fee of \$15.00 shall be paid prior to application approval. You will be contacted to arrange payment.

| PERSONAL DATA   |  |  |                                       |  |          |                                |          |        |      |
|---|--|--|---------------------------------------|--|----------|--------------------------------|----------|--------|------|
| Name  | First  | Last                                   | M.I.                                  | Social Security Number                           |          |                                | -        | -      |      |
| Date of Birth   | MM/DD/YY   |  |                                       | Foreign Resident Visa Number                     |          |                                |          |        |      |
| Home Telephone Number   |  |  |                                       | Date of Expiration                               | MM/DD/YY |                                |          |        |      |
| Work Phone Number   |  |  |                                       | How long to you plan to rent from us?            |          |                                |          |        |      |
| Cell Phone Number   |  |  |                                       | Drivers License Number                           |          |                                |          |        |      |
| Email Address   |  |  |                                       | State of Issuance                                |          |                                |          |        |      |
| Alternate Email Address   |  |  |                                       | Date of Expiration                               | MM/DD/YY |                                |          |        |      |
| Present Address   | City   |  |                                       | State  | Zip      | Country                        |          |        |      |
| How long At present address   | Yrs.   | Mos.                                   | Landlord or Agent Name                |  |          | Landlord or Agent Phone Number |          | Office | Cell |
|   |  |  |                                       |  |          |                                |          | Email  |      |
| Current Rent  | Paid Through                                     |  |                                       | Current Lease Expires                            |          |                                | MM/DD/YY |        |      |
| Previous Address  | City   |  |                                       | State  | Zip      | Country                        |          |        |      |
| How long at previous address  | Yrs.   | Mos.                                   | Landlord or Agent Name                |  |          | Landlord or Agent Phone Number |          | Office | Cell |
|   |  |  |                                       |  |          |                                |          | Email  |      |
| Permanent Address   | City   |  |                                       | State  | Zip      | Country                        |          |        |      |
| Phone   |  |  |                                       |  |          |                                |          |        |      |
| Number of Co-Tenants you plan to live with  |  |  |                                       |  |          |                                |          |        |      |
| Name of Co-Tenant   | First  | Last                                   | M.I.                                  | Relationship to you                              |          |                                |          |        |      |
| Name of Co-Tenant   | First  | Last                                   | M.I.                                  | Relationship to you                              |          |                                |          |        |      |
| Pets?   | If Yes, what kind?                               |  |                                       | How Many?  |          |                                |          |        |      |
| Automobile Make   | Model  |  | Year                                  | State/License No.                                |          |                                | Color    |        |      |
| How did you hear about us?  | <input type="checkbox"/> Word of mouth/friend    |  |                                       | <input type="checkbox"/> Newspaper Advertisement |          |                                |          |        |      |
|   | <input type="checkbox"/> Drove by/Sign in front  |  |                                       | <input type="checkbox"/> Website/Internet        |          |                                |          |        |      |
|   | <input type="checkbox"/> Advertisement at School |  |                                       | <input type="checkbox"/> Posted Flyer            |          |                                |          |        |      |
|   | <input type="checkbox"/> Other (Explain)         |  |                                       |  |          |                                |          |        |      |
| What date are you looking to move in?   |  |  |                                       |  |          |                                |          |        |      |
| How long to you plan to rent from us?   |  |  |                                       |  |          |                                |          |        |      |
| Is there a specific unit you desire? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes', which unit? |  |  |                                       |  |          |                                |          |        |      |
| If 'No', what type of unit are you looking for?   |  |  |                                       |  |          |                                |          |        |      |
| <input type="checkbox"/> One-Bedroom  | <input type="checkbox"/> Two-Bedroom             | <input type="checkbox"/> Three-Bedroom | <input type="checkbox"/> Four-Bedroom |  |          |                                |          |        |      |

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| OCCUPATION  |                     |                    |
|---|---------------------|--------------------|
|   | PRESENT OCCUPATION* | PRIOR OCCUPATION*  |
| Occupation  |                     |                    |
| Employer  |                     |                    |
| Self-employed, doing business as  |                     |                    |
| Business Address  |                     |                    |
| Business Phone  | (   )            -  | (   )            - |
| Type of Business  |                     |                    |
| Position held   |                     |                    |
| Name and Title of Supervisor  |                     |                    |
| How long Supervised By this person?   | Yrs.        Mos.    | Yrs.        Mos.   |
| Monthly Gross Income  | \$                  | \$                 |
| *If employed or self-employed less than two years, give same information of prior occupation. |                     |                    |

| STUDENT INFORMATION  |
|--|
| Are you a student? <input type="checkbox"/> No <input type="checkbox"/> Yes      If Yes: <input type="checkbox"/> Under-graduate Student <input type="checkbox"/> Graduate Student<br>Name of school you are attending _____      Expected year of graduation _____<br>Explain how you plan to pay your rent if not employed _____ |

| REFERENCES   |         |                         |                        |            |
|--|---------|-------------------------|------------------------|------------|
| (Provide at least two non-related individuals that can be contacted to verify your qualifications) |         |                         |                        |            |
| NON-RELATED REFERENCES   | ADDRESS | CONTACT INFORMATION     | LENGTH OF ACQUAINTANCE | OCCUPATION |
| 1.   |         | Office<br>Cell<br>Email |                        |            |
| 2.   |         | Office<br>Cell<br>Email |                        |            |
| 3.   |         | Office<br>Cell<br>Email |                        |            |

| Nearest Relative | ADDRESS | CONTACT INFORMATION     | RELATIONSHIP | OCCUPATION |
|------------------|---------|-------------------------|--------------|------------|
| 1.               |         | Office<br>Cell<br>Email |              |            |
| 2.               |         | Office<br>Cell<br>Email |              |            |
| 3.               |         | Office<br>Cell<br>Email |              |            |

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## OTHER

Provide the total amount of expenses paid to creditors per month (e.g. car payment, rent, utilities, alimony, student loans, child care, etc.) \$

1. Have you ever filed a petition for bankruptcy?  Yes  No
2. Have you ever been asked to leave any tenancy?  Yes  No
3. Have you ever been evicted from any tenancy?  Yes  No

If 'Yes' to questions 2 or 3, explain why

Have you ever willfully and intentionally refused to pay any rent when due? Yes If 'Yes', explain why

**I DECLARE THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT, AUTHORIZE ITS VERIFICATION AND THE OBTAINING OF CONSUMER CREDIT REPORT.**

**I agree that Landlord may terminate any agreement entered into in reliance of any misstatement made above.**

Applicant's Signature \_\_\_\_\_

Dated \_\_\_\_\_