

ROCKWOOD LIVING RENTAL APPLICATION

RENTAL FORM MUST BE COMPLETELY FILLED OUT AND SIGNED. APPLICATION FORM MUST HAVE ALL QUESTIONS ANSWERED AND SIGNED BEFORE IT CAN BE PROCESSED. APPLICATION WILL BE HELD ACTIVE FOR 6 MONTHS. AFTER THAT DATE, THIS OFFICE MUST BE NOTIFIED IF AN EXTENSION IS REQUESTED.

This application is presented to owner or its agent without regard to race, color, creed, sex or national origin.

____ Hudson Court ____ Montego Place ____ Housing ____ Shoreham Park

Full Name: _____ Single ____ Married ____ Widowed ____ Divorced ____ Age: ____

Co-tenant: _____ Single ____ Married ____ Widowed ____ Divorced ____ Age: ____

Present Address: _____
Street & No. City State Zip

Phone: _____ Email address: _____

Address Past 3 Yrs: _____

Reason for Leaving: _____

Total number of persons to occupy suite: _____ No. of Adults: _____ No. of children: _____ Ages of children: _____

MAXIMUM 2 ADULTS TO OCCUPY A ONE BEDROOM APARTMENT. (NO INCREASE IN OCCUPANTS IS ALLOWED WITHOUT WRITTEN PERMISSION OF LESSOR OR AGENT.)

Social Security No. of Applicant : _____ Social Security No. of Spouse or Co-Tenant: _____

Do you have a pet: _____

Name & Address of present landlord: _____

Former landlord (if present address is less than 3 yrs.) _____

Amount of rent: _____ How Many Years At This Address: _____ Landlord's Phone No.: _____

Tenant's Employer: _____ Address: _____

Job Title: _____ Who to Contact: _____ Phone: _____

Length of Service: _____ Monthly Income: _____ Other Income: _____ Source: _____

(Proof of income required)

Type of Automobile: _____ Year: _____ License Plate No. _____ State of Registry: _____

Number of Autos That You Will Keep At This Address: _____ ONLY ONE AUTOMOBILE ALLOWED PER ADULT TENANT

Boats, trucks, trailers, motorcycles, inoperable or unlicensed automobiles, campers & recreational vehicles are prohibited on the premises.

Personal References:

1. _____
Name Address Relationship Phone

2. _____
Name Address Relationship Phone

In case of an emergency Notify (2 Contacts please): 1. _____ Relationship: _____

Address: _____ Phone: _____
Street & No. City State Zip

In case of an emergency Notify: 2. _____ Relationship: _____

Address: _____ Phone: _____
Street & No. City State Zip

Type of Accommodation Desired: ____ Apartment ____ Townhouse Number of Bedrooms: ____ Date Needed: ____
Month Year

Have you ever been evicted for nonpayment of rent: ____ Or other reasons: ____ If yes, explain: _____

AUTHORIZATION VERIFICATION

The undersigned warrants and represents that all statements herein are true and complete and hereby authorizes lessor or agent to check references, verify income, employment, rental history and obtain a written credit report and background check. **Application subject to landlord accepting credit rating and background check (\$45 application fee per applicant is due before lease is processed).** If lessee wants a signed lease canceled, it is understood that the deposit will be forfeited.

All applicants MUST sign this application.

APPLICANT SIGNATURE ONLY _____ Date: _____

APPLICANT SIGNATURE ONLY _____

Rockwood Living LLC, and its agents and employees, strictly abide by all applicable Federal, State, and Local Laws. Rockwood Living LLC does not discriminate on the basis of race, color, religion, sex, national origin, family status, disability, or other protected classes under federal/state/local law.

Rockwood Living's rental policy for **Hudson Village and Single-Family rental properties** is that we will require the following:

- > Two (2) months proof of Income required
- > Gross Income must be at least 2.5 times the rent
- > Credit Scores must be 650 or higher
- > No Co-Signers
- > No Evictions or Bankruptcies in the past 7 years

APPLICANT SIGNATURE ONLY _____ Date: _____

Rockwood Livings, LLC's rental policy for **Shoreham Park** will require the following:

- > Two (2) months proof of Income required
- > Gross Income must be at least 3 times the rent
- > Credit Scores must be 620 or higher
- > No Co-Signers
- > No Evictions or Bankruptcies in the past 7 years

APPLICANT SIGNATURE ONLY _____ Date: _____