

Customized Solutions

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RENTAL APPLICATION

FOR OFFICE USE ONLY

DATE _____
PROPERTY _____
APT. NO. _____ RENT \$ _____
AGENT _____

Please complete all requested information on the front and the back of this form. All occupants 18 years of age and older must fill out an application. ALL APPLICATIONS MUST BE COMPLETELY FILLED OUT IN ORDER TO BE CONSIDERED FOR THE APARTMENT. Thank you for your interest in our apartments.

Date of Application _____ Desired Date of Occupancy _____
Type and Size of Apartment Wanted (No. of Bedrooms, etc.) _____

PERSONAL INFORMATION

APPLICANT'S FULL NAME _____ Date of Birth _____
Social Security No. _____ Driver's License No. _____ State _____

Full Names of All Other Residents:	Relationship to You	Date of Birth		Social Security #

How Many Pets Do You or Other Occupants Own? _____
Kind of Pet, Breed, Weight and Age _____
How Did You Hear About Our Property _____

RESIDENCE HISTORY

PRESENT ADDRESS _____ City _____ State _____ Zip _____

Your Telephone _____ Dates From: _____ To: _____

Your Mobile _____ Email _____

Present Landlord or Mortgage Co. _____ Telephone _____

Monthly Payment \$ _____ Reason for Moving _____

PREVIOUS ADDRESS _____ City _____ State _____ Zip _____

Dates From: _____ To: _____

Previous Landlord or Mortgage Co. _____ Telephone _____

Monthly Payment \$ _____ Reason for Moving _____

PREVIOUS ADDRESS _____ City _____ State _____ Zip _____

Dates From: _____ To: _____

Previous Landlord or Mortgage Co. _____ Telephone _____

Monthly Payment \$ _____ Reason for Moving _____

EMPLOYMENT INFORMATION

PRESENT EMPLOYER _____ Dates From: _____ To: _____

Employer's Address _____ Telephone _____

Position _____ Supervisor _____ Gross Monthly Salary \$ _____

PREVIOUS EMPLOYER _____ Dates From: _____ To: _____

Employer's Address _____ Telephone _____

Position _____ Supervisor _____

PREVIOUS EMPLOYER _____ Dates From: _____ To: _____

Employer's Address _____ Telephone _____

Position _____ Supervisor _____

BANKING AND CREDIT REFERENCES

BANK NAME & BRANCH _____ Telephone _____
 Checking Acct. No. _____ Savings Acct. No. _____
 Loan Acct. No. _____ Monthly Payment \$ _____
 NON FAMILY REFERENCE: Full Name: _____ Phone (____) _____
 Full Address: _____ Relationship _____

OTHER INFORMATION

TOTAL NUMBER OF VEHICLES (Including Company Vehicles) _____
 Make/Model _____ Year _____ Color _____ Tag No. _____ State _____
 Make/Model _____ Year _____ Color _____ Tag No. _____ State _____
 Other Car, Motorcycle, etc. _____

Total Gross Monthly Household Income \$ _____
 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 \$ _____ Per _____ Source _____ Telephone _____
 Amount \$ _____ Per _____ Source _____ Telephone _____
 Comments: _____

HAVE YOU OR YOUR CO-APPLICANT EVER: Been to Housing Court 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 damages to rental property? Yes No Declared Bankruptcy? Yes No
 Been arrested? Yes No Details: _____

In Case of Personal Emergency, Notify: _____ Relationship _____
 Address _____ Home # _____ Mobile # _____ Work # _____

I hereby make application for an apartment and certify that this information is correct. I authorize you to contact any references that I have listed. I also authorize you to obtain my consumer credit report from your credit reporting agencies, which will appear as an inquiry on my file, and check criminal & sex offender records.

APPLICANT'S SIGNATURE _____
 UNIT APPLYING FOR _____
 DATE SIGNED _____

FOR OFFICE USE ONLY – DO NOT WRITE BELOW

Date Application Received _____ Received By _____

REFERENCE VERIFICATION	REMARKS
<input type="checkbox"/> Present Landlord	
<input type="checkbox"/> Previous Landlord	
<input type="checkbox"/> Previous Landlord	
<input type="checkbox"/> Employment	
<input type="checkbox"/> Previous Employment	
<input type="checkbox"/> Bank	
<input type="checkbox"/> Credit Check	
<input type="checkbox"/> Other	

RECORD OF PAYMENTS RECEIVED		
Date	Description	Amount

THIS APPLICATION Approved Not Approved

Date _____
 By _____
 Assigned to Apt. No. _____ Rent \$ _____
 Apartment Address _____
 Applicant Notified By _____
 Anticipated Move-In Date _____