

APPLICATION FOR OCCUPANCY

Province of Briarcliff
Apartment Homes

Please fill out completely. Of course, for your protection, the enclosed questions are considered necessary, and all information will be kept strictly confidential.

PART I - PERSONAL INFORMATION

Phone Number(s):

Date \_\_\_\_\_ 20\_\_\_\_\_

Desired Date of Occupancy \_\_\_\_\_

Name \_\_\_\_\_
First Middle Last

Married Separated\*
Single Divorced\* \*How Long? \_\_\_\_\_

Date of Birth \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Spouse's Name \_\_\_\_\_
First Middle Last

Maiden Name if Married Less Than 2 Years \_\_\_\_\_

Date of Birth \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Total Number of People Who Will Occupy Apartment: \_\_\_\_\_

Children (under 18, OPTIONAL) \_\_\_\_\_

Names/Ages of Children Who Will Occupy (OPTIONAL) \_\_\_\_\_

Description of Pets \_\_\_\_\_ Pet Adult Weight \_\_\_\_\_

In Case of Emergency, Notify \_\_\_\_\_ ( ) \_\_\_\_\_
Name Address Phone

PART II - RESIDENCE HISTORY (Up to 2 Years)

A) Present Landlord \_\_\_\_\_ ( ) \_\_\_\_\_
Address with City, State, Zip Phone

Present Address \_\_\_\_\_ ( ) \_\_\_\_\_ From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_
Address with City, State, Zip Phone

B) Previous Landlord \_\_\_\_\_ ( ) \_\_\_\_\_
Address with City, State, Zip Phone

Previous Address \_\_\_\_\_ ( ) \_\_\_\_\_ From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_
Address with City, State, Zip Phone

C) Previous Landlord \_\_\_\_\_ ( ) \_\_\_\_\_
Address with City, State, Zip Phone

Previous Address \_\_\_\_\_ ( ) \_\_\_\_\_ From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_
Address with City, State, Zip Phone

PART III - EMPLOYMENT HISTORY (Up to 2 Years)

A) Employed by \_\_\_\_\_ Phone ( ) \_\_\_\_\_ From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_
Address \_\_\_\_\_ Dept./Position \_\_\_\_\_ Gross Mo. Income \$ \_\_\_\_\_

B) Spouse's Employment \_\_\_\_\_ Phone ( ) \_\_\_\_\_ From \_\_\_/\_\_\_/\_\_\_ To \_\_\_/\_\_\_/\_\_\_
Address \_\_\_\_\_ Dept./Position \_\_\_\_\_ Gross Mo. Income \$ \_\_\_\_\_

C) Bank Reference \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ From \_\_\_\_/\_\_\_\_/\_\_\_\_ CK\_\_\_\_ SV\_\_\_\_\_

Address \_\_\_\_\_ Account Number \_\_\_\_\_

D) Other Income \_\_\_\_\_

(Indicate Source and Amount, **Must be verifiable**)

**PART IV - CREDIT & CHARACTER REFERENCES**

Credit References (*Only if not listed on credit report*):

1. \_\_\_\_\_ Acct. # \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

2. \_\_\_\_\_ Acct. # \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Character References (*Only if first time renter an/or no credit*):

1. \_\_\_\_\_ Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

2. \_\_\_\_\_ Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Number of Cars (include company cars) \_\_\_\_\_ Driver's License # \_\_\_\_\_ State \_\_\_\_\_

Applicant #2 - Driver's License # \_\_\_\_\_ State \_\_\_\_\_

Make/Model \_\_\_\_\_ Color \_\_\_\_\_ Year \_\_\_\_\_ License Plate \_\_\_\_\_

Make/Model \_\_\_\_\_ Color \_\_\_\_\_ Year \_\_\_\_\_ License Plate \_\_\_\_\_

Have you ever been evicted or placed for eviction? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been convicted of a crime or felony? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes please explain: \_\_\_\_\_

By signing this application, you declare that all of your responses are true and complete and authorize owner to verify this information. Any false statement made on this application can, among other responses, lead to rejection of your application or the immediate termination of your lease.

Date \_\_\_\_\_ Signature \_\_\_\_\_  
Applicant

Date \_\_\_\_\_ Signature \_\_\_\_\_  
Applicant's Spouse

Non-Refundable Application Fee \$ \_\_\_\_\_

Security Deposit Required \$ \_\_\_\_\_

Pet Deposit Required \$ \_\_\_\_\_

Total Amount Required \$ \_\_\_\_\_

Amount Paid \$ \_\_\_\_\_

Amount Still Due \$ \_\_\_\_\_

**APARTMENT INFORMATION (Must be completed by owner)** \_\_\_\_\_ Approved \_\_\_\_\_ Declined

Address of Apt. Rented: \_\_\_\_\_ Leasing Pro: \_\_\_\_\_ Occupants: \_\_\_\_\_ Pets: \_\_\_\_\_ Type: \_\_\_\_\_

Length of Lease \_\_\_\_\_ Notice Required \_\_\_\_\_ Apt. Size: 1Bdr \_\_\_\_\_ Check or M/O \_\_\_\_\_ Move in Date \_\_\_\_\_

Months: \_\_\_\_\_ Days: 30 2Bdr \_\_\_\_\_ 3Bdr \_\_\_\_\_ C/C authorization # \_\_\_\_\_ Mo. Rent \_\_\_\_\_