

**RENTAL CREDIT APPLICATION**  
**SUTTON PLACE APARTMENTS**  
**Subject to Landlord's Approval)**

Date \_\_\_\_\_

**THIS APPLICATION WILL BE CONSIDERED ONLY IF IT IS COMPLETELY FILLED OUT, WITH NO BLANK SPACES. WRITE "NONE" OR "NOT AVAILABLE" IF THAT IS THE ANSWER. EACH ADULT WHO WILL LIVE IN THE APT. IS TO FILL OUT AN APPLICATION.**

\_\_\_\_\_  
Name of applicant (First, M.I., Last) (Jr or Sr.)      Maiden Name      Social Security #      Date of Birth

\_\_\_\_\_  
Present address    Rent \_\_\_\_\_ Own \_\_\_\_\_ Apt #      City      State    Zip      How long lived here

(      )      (      )  
Home Phone #      Cell Phone #      Email Address

\_\_\_\_\_  
Reason for Leaving      Monthly Rent      Utilities included      Yes    No

\_\_\_\_\_  
Present Landlord      Address      (      )  
Phone #

\_\_\_\_\_  
Previous Address      Apt #      City      State    Zip      Dates Lived There

\_\_\_\_\_  
Reason for Leaving      Monthly Rent

\_\_\_\_\_  
Former Landlord      Address      (      )  
Phone #

\_\_\_\_\_  
Previous Address      Apt #      City      State    Zip      Dates Lived There

\_\_\_\_\_  
Reason for Leaving      Monthly Rent

\_\_\_\_\_  
Former Landlord      Address      (      )  
Phone #

=====  
Have you ever broken a lease or been evicted from any type of housing ? (if yes, explain)

=====  
Have you or any proposed occupant ever been convicted of a crime? (if yes, explain)

\_\_\_\_\_  
Employer      Complete Address      (      )  
Telephone #

\_\_\_\_\_  
Occupation      Weekly Take Home Pay      Length of Employment

\_\_\_\_\_  
Source of Additional Income      Amount of Income

\_\_\_\_\_  
Former Employer      Address      (      )  
Telephone #      How long there?

\_\_\_\_\_  
Personal Reference-Name      Address      (      )  
Telephone #

OVER - APPLICATION CONTINUED ON BACK SIDE

Additional persons who will reside in Apt - Name

Relationship

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Size of Apt.	Occupancy Date	Driver's License	State
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Auto(s):	Year	Make	Model	Color	License Plate #	State
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Describe any pets you wish to occupy the apartment.

_____ Newspaper	_____ For Rent Guide	_____ Referral	_____ Other
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How did you hear about us? (which one)

In case of emergency notify- Name	Address	Relationship	( ) Telephone #
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The undersigned warrants and represents that all statements herein are true and agrees to execute upon presentation a Lease Agreement in the usual form and on the terms and conditions herein stated, which lease or agreement may be terminated by the Lessor if any statement herein made is not true. Deposit is to be applied on rent and retained as liquidated damages, except it is to be refunded if said application is not accepted by the owner. This application and deposit are taken subject to previous applications.

I hereby apply for the apartment listed above. With my signature below, I request all credit reporting services, employers, landlord and personal references to disclose any pertinent information about me.

For purposes of clerical necessity this application shall be valid for 3 months from the date the completed application is received in our office. If you continue to seek an apartment with us when this application has expired you must submit a newly completed application.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

*Thank you for applying with us. We hope to Welcome you to our community soon.*

FOR OFFICE USE ONLY

**APT #** \_\_\_\_\_

Co-Resident \_\_\_\_\_ Move In Date \_\_\_\_\_

Date Application Received \_\_\_\_\_ Time \_\_\_\_\_ Received by \_\_\_\_\_

Reference Verification

Application

\_\_\_ Present Address    \_\_\_ Employment  
 \_\_\_ Previous Address    \_\_\_ Credit  
 \_\_\_ Photo ID Checked

\_\_\_ Approved  
 \_\_\_ Not Approved  
 \_\_\_ Rejection Letter Sent

Initials \_\_\_\_\_ Date \_\_\_\_\_

Please bring or mail the completed application to the rental office at  
 Sutton Place Apartments, c/o Ashley Arms Apartments, 131 Ashley Ave, W. Springfield, MA 01089