Krantz Rentals

Linda K. Smith

129 N. Main St.

Albion, NY 14411

Phone (585) 589-4270

Email: krantzfurniture@gmail.com

RENTAL APPLICATION

Items Needed: Current Picture ID, Social Security Card

* **Each** adult (**18 or older**) must fill out a **separate** application
* There is a **non-refundable** fee of $20/adult to apply

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| First Middle Last | Birth Date | | | Social Security # | | | Driver’s License # |
| Click here to enter text. | Click here to enter text. | | | Click here to enter text. | | | Click here to enter text. |
| Any Other Names You’ve Used In The Past | | | Home Phone # | | | Cell Phone # | |
| Click here to enter text. | | | Click here to enter text. | | | Click here to enter text. | |
| All Other Proposed Occupants | | Birth Date | | | Relationship To Applicant | | |
| Click here to enter text. | | Click here to enter text. | | | Click here to enter text. | | |
| Click here to enter text. | | Click here to enter text. | | | Click here to enter text. | | |
| Click here to enter text. | | Click here to enter text. | | | Click here to enter text. | | |
| Click here to enter text. | | Click here to enter text. | | | Click here to enter text. | | |
| Click here to enter text. | | Click here to enter text. | | | Click here to enter text. | | |

**RENTAL/RESIDENCE HISTORY**

|  |  |  |
| --- | --- | --- |
| Current Residence | Previous Residence | Prior Residence |
| Street Address | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| City | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| State & Zip | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Last Rent Amount Paid | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Owner/Manager | | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| And Phone Number | | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Reason For Leaving | | Click here to enter text. | Click here to enter text. | Click here to enter text. |
|  | |  |  |  |
| Is/Was rent paid in full? | | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Did you give notice? | | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Were you asked to move? | | Click here to enter text. | Click here to enter text. | Click here to enter text. |
|  | |  |  |  |
| Name(s) in which your utilities are now billed: | | Click here to enter text. | Click here to enter text. | Click here to enter text. |
|  | | From/To | From/To | From/To |
| Dates of Residency | | Click here to enter text. | Click here to enter text. | Click here to enter text. |

**EMPLOYMENT HISTORY**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Current Employment | Previous Employment | Prior Employment |
| Employed By | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Address | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Employer’s Phone # | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Occupation | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Name of Supervisor | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Monthly Gross Pay | Click here to enter text. | Click here to enter text. | Click here to enter text. |
|  | From/To | From/To | From/To |
| Dates of Employment | Click here to enter text. | Click here to enter text. | Click here to enter text. |

**CREDIT HISTORY**

|  |  |  |
| --- | --- | --- |
|  | Bank/Institution Name | Balance on Depos |
| Savings Account | Click here to enter text. | Click here to enter text. |
| Checking Account | Click here to enter text. | Click here to enter text. |
| Credit Card | Click here to enter text. | Click here to enter text. |
| Auto Loan | Click here to enter text. | Click here to enter text. |

Vehicles (Include vehicles belonging to other proposed occupants also)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Make | Model | Color | Year | License Plate |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
|  |  |  |  |  |

**REFERENCES &EMERGENCY CONTACTS**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Doctor | Lawyer | Nearest Relative Living Elsewhere |
| Name | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Street Address | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| City | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| State & Zip | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Phone Number | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| By signing the application you grant us permission to communicate with all contacts listed in this section in the event we can’t locate you. Furthermore, if you abandon the apartment for any reason then you grant us permission to allow your relative listed above to remove all contents of the dwelling on your behalf. | | | |

**GENERAL INFORMATION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Do any of the people | | | | How long do you think |
| Have you ever been served a late rent notice? | Who would be living in the apartment smoke? | | | | you would be renting from us? |
| Click here to enter text. | Click here to enter text. | | | | Click here to enter text. |
| Have you ever filed for bankruptcy? If so, when? | | When would you be able to move in? | | Have you ever been convicted of a felony? | |
| Click here to enter text. | | Click here to enter text. | | Click here to enter text. | |
| Have you ever been served an eviction notice? If so, when? | | | How many pets do you have (list type, breed, approx weight & age)? | | |
| Click here to enter text. | | | Click here to enter text. | | |

|  |  |
| --- | --- |
| Have you had any reoccurring problems with your current apartment or landlord? If yes, please explain? | |
| Click here to enter text. | |
| Why are you moving from your current address? | |
| Click here to enter text. | |
| List any verifiable sources and amount of income you wish to have considered (optional): | |
| Click here to enter text. | |
| If you were to run into financial difficulty in the future and couldn’t come up with the money to pay the rent, do you know someone that would loan you the money? If so, provide the person’s name, address, & phone number so that we can use them as a reference for you. | |
| Click here to enter text. | |
| Have you been a party to a lawsuit in the past? If yes, please explain why: | |
| Click here to enter text. | |
| We may run a credit check and criminal background check. Is there anything negative we will find that you want to comment on? | |
| Click here to enter text. | |
| How did you hear about this apartment? | Do you have an e-mail address we can reach you at? |
| Click here to enter text. | Click here to enter text. |
| Do you know of anybody else looking for an apartment? Please provide their name and number. If you refer a friend and you each end up renting separate apartments from us then we will pay you a referral reward. | |
| Click here to enter text. | |

Agreement & Authorization Signature

I believe that the statements I have made are true and correct. I hereby authorize a credit and/or criminal check to be made, verification of information I provided and communication with any and all names listed ion this application. I understand that any discrepancy or lack of information may result in the rejection of this application. I understand that this is an application for an apartment and does not constitute a rental or lease agreement in whole or part. I further understand that there is a **NON-REDUNDABLE** fee to cover the cost of applications must be submitted in writing and accompanied by a self stamped envelope.

Signature: Click here to enter text.

Date: Click here to enter text.