

WASHINGTON MILLS BUILDING NO 1
270 Canal Street
Lawrence, MA 01840
Managed By: HallKeen Management

APPLICATION COVER SHEET

Date of Application: _____

Name of Applicant: _____

Apartment Address: _____

Unit Size: _____ Studio 1 Bedroom 2 Bedroom 3 Bedroom

Move-In Date: _____

Monthly Rent Amount: _____

Security Deposit: _____

Amount of Application Fee or Deposit Enclosed: \$ _____ Check # _____

APPLICATION FEE IS NON-REFUNDABLE. _____

Special Incentives or Requests: _____

Property Manager's Signature: _____

Applicant's Signature: _____

** PLEASE REMEMBER TO SIGN AND COMPLETE ENTIRE APPLICATION **

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RENTAL APPLICATION

(Note: Each co-resident over 18 years of age must submit a separate application.)

APPLICANT

Full Name:	Phone #:
Social Security #:	Initial if over 18 years of age
Occupation:	Gross Annual Income:
Number of Bedrooms Required:	D.O.B:
E-mail address:	License # and State:
List others to reside in apartment:	
1.	
2.	

APPLICANT INFORMATION

Present Address:			
Street:	Apt. #:		
City:	State:	Zip Code:	
Rent or Own?	Dates:	Mthly Payment:	
Landlord/Lender:	Street:		
City:	State:	Phone:	
Previous Address:			
Street:	Apt. #:		
City:	State:	Zip Code:	
Rent or Own?	Dates:	Mthly Payment:	
Landlord/Lender:	Street:		
City:	State:	Phone:	

Current Employer or Income Source (If self-employed please attach most recent W-2 or 1099 tax documents.)

Name of Employer/Source of Income:	
Address:	
Phone #:	Employment Date:
Position:	Salary:

Previous Employer or Income Source:

Name of Employer/Source of Income:

Address:

Phone #:

Employment Date:

Position:

Salary:

Other source of Income

Type of Income

Source/Bank

Gross Annual Amount

1.

2.

Bank References

Name and Address of Bank:

Account Type and Account #:

Balance: \$

Name and Address of Bank:

Account Type and Account #:

Balance: \$

Credit References:

Account Type

Acct. #

Bank Name

Bal. Owed

Have you ever been evicted from your home for any reason? If so, please give details:

Have you ever been arrested or convicted of any crime? If so, please give details:

Relatives/Emergency Contact (Not residing with you)

1. Name:

Relationship:

Address:

Phone:

2. Name:

Relationship:

Address:

Phone:

How Did You Hear About Us?

Advertisement – If so, which newspaper or website?

Friend, family or co-worker – If so, please give us the name of the person who referred you so we can thank them:

Other -- Please explain:

Base rent and other monthly charges are due and payable on the first day of each month in advance.

Management shall not make any inquiry concerning race, religious creed, color, national origin, sex, sexual orientation, age (except if a minor), ancestry or marital status of the applicant or concerning the fact that the applicant is a veteran or a member of the armed forces or is handicapped or disabled. The applicant authorizes the Management and/or Renting Agency to obtain or cause to be prepared a consumer credit report and criminal background report relating to the applicant.

Neither the Owner nor the Management is responsible for the loss of personal belongings caused by fire, theft, smoke, water or otherwise, unless caused by their negligence.

The undersigned warrants and represents that all statements herein are true and agrees to execute upon presentation a Lease agreement in the usual form, a copy of which the applicant has received or has had occasion to examine, which lease or agreement may be terminated by the Lessor if any statement herein made is not true. Deposit is to be applied to actual damages sustained by the owner, 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.

Signature of Applicant

Date

Signature of Applicant

Date

Base Rent Per Month:

Other Monthly Charges:

Explain (eg. Parking, etc.):

Application Fee:

Security Deposit:

Last Month's Rent:

Bal. Due Upon Acceptance:



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LANDLORD REFERENCE

TO: _____ FAX #: _____

DATE: _____ RE: _____

PLEASE RETURN TO: Washington Mills Building No 1
270 Canal Street
Lawrence, MA 10840
Fax# (978) 685-3335

TO APPLICANT: In order to be accepted, an applicant must have a good residency record – for paying rent, maintaining the apartment, not interfering with neighbors, no housing-related criminal activities, including current illegal drug abuse, and cooperation in supplying income and other verification necessary to establish eligibility for the housing – or must be able to establish that their history otherwise suggests that they are willing and able to comply with the lease. An applicant with a past residency problem related to a disability may provide information regarding “mitigating circumstances” (an explanation of what happened and reasons why it is not likely to happen again) or may ask for a “reasonable accommodation” (something a landlord can do to enable you to meet the lease requirements or something a service agency will do to enable you to meet lease requirements). You can choose to explain any problem and ask for a reasonable accommodation on this form or you may do it later if the residency history is leading to or does result in a rejection.

TO REFERENCE SOURCE: I am applying for housing and authorize the release of the information requested below. I understand that the information is to be used only for purposes of housing and will be kept in a confidential file.

Applicant's Name (printed) _____

Signature of applicant/guardian _____

Date: _____