



ROSETTI PROPERTIES

APPLICATION FOR RESIDENCY

A \$50.00 non-refundable fee for each non-related applicant is required upon submission of application
Failure to complete ALL areas of application may result in processing delays

Complex: _____ Apartment # Preferred: _____ Desired Move-In Date: _____

PLEASE TELL US ABOUT YOURSELF

Applicant's Full Name: _____ Date of Birth: _____ Social Security #: _____

Drivers' License # _____

Co-Applicant's Full Name: _____ Date of Birth: _____ Social Security #: _____

Drivers' License # _____

of children to reside in apartment under the age of 18: _____

Emergency Contact Info:

Name: _____ Relationship: _____

Address: _____ Telephone #: _____

Please provide three (3) years of residential history

Each resident over the age of 18 must submit a separate rental application

APPLICANT'S RESIDENCE HISTORY

Applicant's Current Address: _____

Cell #: _____ Home #: _____ E-mail Address: _____

Current Landlord's Name: _____

Landlord's Telephone #: _____

Reason for Moving: _____

Current Mortgage / Rent: \$ _____

Date of Residency: From _____ to _____

Former Landlord's Name: _____

Landlord's Telephone #: _____

Reason for Moving: _____

Former Mortgage / Rent: \$ _____

Date of Residency: From _____ to _____

Former Landlord's Name: _____

Landlord's Telephone #: _____

Reason for Moving: _____

Former Mortgage / Rent: \$ _____

Date of Residency: From _____ to _____

APPLICANT'S EMPLOYMENT HISTORY

Applicant's Current Employer's Name/Address: _____

Current position: _____ Length of Employment: _____ Annual Income: \$ _____

Supervisor's Name: _____ Supervisor's Telephone #: _____

Former Employer: _____ Former Supervisor's Telephone #: _____

Applicant's Former Employer's Name/Address: _____

Former position: _____ Length of Employment: _____ Annual Income: \$ _____

Supervisor's Name: _____ Supervisor's Telephone #: _____

Former Employer: _____ Former Supervisor's Telephone #: _____

MISCELLANEOUS INFORMATION

Do you have any pets?: Yes No

If there are any additional sources of income you would like us to consider, please list source and income amount below:

Has any applicant listed above ever filed or currently filing for bankruptcy? Yes No

If yes, when? _____ Has bankruptcy been justified? If so, when _____

Have you ever been evicted or asked to move?: Yes No

If so, why: _____

Conviction Information:

Have you ever been convicted of, or pleaded "Guilty" or "No Contest" to a misdemeanor or felony? Yes No

Explain: _____

RENTAL APPLICATION PAYMENT

Name _____

Billing Address: _____ Zip: _____ Country: _____



Credit Card #: _____ Expiration Date: _____ Security Code : _____

QUALIFICATION REQUIREMENTS

IT IS UNLAWFUL TO DISCRIMINATE AGAINST AN APPLICANT OR TENANT BECAUSE OF THEIR RACE, COLOR, NATIONAL ORIGIN, RELIGION, GENDER, FAMILIAL STATUS, DISABILITY, OR ANY OTHER BASIS THAT MAY BE PROTECTED UNDER APPLICABLE STATE OR LOCAL LAW.

The undersigned certifies that all of the above information is true, correct, and complete and authorize ROSETTI PROPERTIES, its employees and agents, to contact and obtain information from any individuals or entities that may have information to obtain and verify all credit, employment and all prior residences information.

By accepting the application fee and security deposit, ROSETTI PROPERTIES is not obligated to approve this application or rent the apartment to above listed applicant(s). The approval of this application is contingent upon our receipt of a satisfactory report of your rental history, credit history and other information that we deem necessary. ROSETTI PROPERTIES elects not to give any explanation should this application be denied.

If this application is approved, the deposit will be held as security for the performance of all terms and conditions of the lease agreement. If this application is approved and the applicant does not enter into a lease agreement, the deposit shall **not** be refunded. In the event this application is not approved, the deposit will be refunded in full to the applicant and both parties shall have no further liability to each other.

Upon entering a lease agreement, Landlord requires applicant to provide Renter's insurance certification.

Signature of Applicant

Date

For Office Use Only

REFERENCE VERIFICATION:

APPLICATION/LEASE INFORMATION

• Present Landlord: _____

Application Fee \$ _____
Date Accepted: _____

• Previous Landlord: _____

Security Deposit: \$ _____
Date Accepted: _____

• Employment: _____

CBC Score _____

• Co-Applicant Employment: _____

Lease Begin Date _____