

OLDE ORCHARD PARK APARTMENTS

APPLICATION TO RENT

Today's Date: _____

Unit # _____

Desired Date of Occupancy: _____

PLEASE PRINT ALL INFORMATION
INCOMPLETE APPLICATIONS WILL BE REJECTED!

PERSONAL INFORMATION:

Name: _____ DOB: _____ SS#: _____

Current Address: _____ City: _____ State: _____ ZIP Code: _____

Current Phone #: _____ Cell Phone #: _____ Work #: _____

Email address: _____ Current monthly rent \$ _____

Identification – Driver's License/Passport #: _____ Other: _____

List all household members who will be residing in the prospective rental: _____

Please provide the following for each location you have resided over the previous three (3) years:

| Landlord's Name | Landlord's Phone # | Street Address, City, State | Dates of Residence | Reason for Leaving |
|-----------------|--------------------|-----------------------------|--------------------|--------------------|
| | | | | |
| | | | | |
| | | | | |

Does Current Landlord know you are leaving the apartment/house? Yes No

VEHICLE INFORMATION:

| | Vehicle #1 | Vehicle #2 |
|---------------------|------------|------------|
| Type of Vehicle | | |
| Make | | |
| Model | | |
| Year | | |
| Color | | |
| VIN | | |
| License Plate # | | |
| State Registered In | | |

| Employment/Source of Funds | | Financial Information | |
|--------------------------------------|--|-------------------------|--|
| Name of Employer/ Source of Funds | | Checking Account # | |
| Phone Number | | Bank Name & City | |
| Supervisor | | Savings Account # | |
| Position | | Bank Name & City | |
| Employed Since | | Credit Cards? | __ Yes __ No |
| Gross Monthly Salary/Funds | | Type of Credit Card(s)? | __ Mastercard __ Visa __ AmEx __ Discover |
| Other Sources of Funds & Amount | | | |

PERSONAL REFERENCES:

Name: _____

Address: _____

Telephone Number: _____

Relationship to Applicant: _____

Name: _____

Address: _____

Telephone Number: _____

Relationship to Applicant: _____

Name: _____

Address: _____

Telephone Number: _____

Relationship to Applicant: _____

MISCELLANEOUS:

| Question | Yes | No | Details |
|---|-----|----|--|
| Do you own any real estate? | | | Where? |
| Do you have any pets? If yes, what kind? | | | If yes, please fill out and submit the Pet Resume. |
| Have you ever been arrested or charged with a crime? | | | |
| Have you ever received an Eviction Notice from a Landlord? | | | |
| Have you ever had a dispute with or been evicted by a Landlord? | | | |
| Do you smoke? | | | |

EMERGENCY CONTACTS:

In case of emergency notify: Name: _____ Telephone #: _____

Address: _____ Relationship: _____

SIGNATURE AND RELEASE OF INFORMATION

Please read the following prior to signing this Rental Application.

I warrant that the information supplied is true and correct, and that I am at least 18 years of age.

I hereby authorize Larkin & Milot Partnership ("Lessor") and its designated agents and representatives (individually and together) to conduct a comprehensive background check that includes any one or all of the following: Consumer and/or business credit report, past employment and tenancy, criminal, drug, and driving records. I understand that one or more of the above-referenced checks may require additional written authorizations and consents, and I hereby agree to provide all such further written authorizations and consents.

I am aware that the background reports I consent to have prepared, may include information obtained from a variety of sources, including but not limited to government agencies, national credit reporting agencies, and other sources.

By this authorization, I hereby forever release, discharge, exonerate, hold harmless and indemnify Lessor, and their affiliates, employees, representatives, agents, and subcontractors, and any other person, entity, organization or institution furnishing information to them, from any and all liabilities of every nature and kind, including but not limited to claims for libel, slander, invasion of privacy, related tort claims, misuse of the information obtained, and any other claim or cause of action arising out of the furnishing, inspection, or copying of any documents, files, records, and other information, or the investigation made by or on behalf of Lessor, unless such release is determined to violate the public policy of the state or federal district in which this contract is executed, and in that event, this release will be permitted to the maximum extent allowed by the governing law. I understand that a photocopy, facsimile or scanned copy of this signed document shall be considered as valid as an original.

I have been informed that my credit will be used to evaluate my qualifications as a potential tenant. Any information derived from credit reports or other sources will be kept confidential and not revealed to any outside party.

I hereby acknowledge that false information given in this Rental Application may constitute grounds for rejection of this application and termination of your lease.

I hereby acknowledge that incomplete Rental Applications will be rejected.

I authorize listed references, including employers and financial institutions, to release information to Lessor (Landlord).

I, the undersigned Applicant(s), have read and agree to all provisions of this Rental Application.

Applicant Signature

Date

Printed Name

PLEASE RETURN TO LANDLORD

**L&M Partnership
P.O. Box 4193
Burlington, VT 05406
Phone: 802.864.3538 Fax: 802.864.0649
Email: oldeorchardpark@gmail.com**