

**"We'd love to have you join our Community"
MINI-APPLICATION FOR LEASE**

Date: _____ Consultant: _____

How did you hear about us? _____

Date Apt. Needed: _____

Apartment Size Needed: Studio / 1 Bedroom / 2 Bedroom / 3 Bedroom

Name: _____

Birth Date: _____

Current Address: _____

Social Security No.: _____

City/State: _____ Zip: _____

Driver License No.: _____ State: _____

Home Telephone No.: _____

Auto Plate No.: _____

Pager No.: _____

Pets? Y / N Type/Breed: _____ Weight: _____ lbs.

Work Telephone No.: _____

Email Address _____

Housing References:

Current Landlord Name: _____ Previous Landlord: _____ Tel. No.: _____

Landlord Tel. No.: _____ Your Previous Address: _____

Current Monthly Rent: _____ Previous City/State: _____ Zip: _____

Employment:

Current Employer: _____ Employer Telephone No.: _____

Job Title: _____ Wage: _____ Hours Per Week: _____ Employed from: _____ to Present

Second Employer: _____ Employer Telephone No.: _____

Job Title: _____ Wage: _____ Hours Per Week: _____ Employed from: _____ to Present

Criminal History:

Have you ever been convicted of a crime? Y / N If so, state where, when, by whom and which court, and what crime you were convicted of: _____

Residence History:

Have you previously been evicted from a rental community? Y / N If so, state where, when, by whom and which court: _____

Note-Every occupant, age 18 or older, is required to complete an application and pay the application fee.

Occupants: (Please list everyone that will live in the household)

| | Name | Relationship | Birth Date |
|----|-------------|---------------------|-------------------|
| 1. | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ |
| 4. | _____ | _____ | _____ |
| 5. | _____ | _____ | _____ |
| 6. | _____ | _____ | _____ |

| | | |
|---|----------------|-------------------------------|
| IN CASE OF EMERGENCY, notify next of kin: (Local, if possible) | Name: _____ | Telephone No: (_____) _____ |
| | Address: _____ | Relationship: _____ |
| | City: _____ | State: _____ Zip: _____ |

The undersigned hereby makes application to ANDOVER MANAGEMENT CORPORATION as Rental Agent (hereinafter referred to as AMC) for the lease of an apartment, at the monthly rate of \$ _____ payable monthly in advance on the first day of each month, for a term of _____ and request occupancy as of _____, 20____. As an inducement to AMC to accept this application, the undersigned hereby represents and swears under oath and upon the penalties of perjury that all facts stated in this entire application are true and authorizes AMC to verify any information contained herein and make such other investigation as it shall deem necessary to determine the undersigned's financial and credit standing and moral character, including the investigation of my credit, criminal and/or employment history, through public records, a reporting agency or otherwise. I further authorize the release of any information relevant to such investigation by any person or entity possessing such information.

UNDERSTANDINGS AND AGREEMENTS

As APPLICANTS, I (we) understand and agree that:

1. I (we) acquire no right to any apartment until the Application is approved by the management, a lease is signed in the form submitted and a security deposit and the first month's rent in advance are paid in full. The above mentioned apartment will be used as a private dwelling only and occupied by only those persons listed in this Application. Move in payment to be made by **money order or cashier's check only** or credit card.
2. Once the lease is signed by APPLICANT and AMC, the lease is a binding contractual obligation, even if the APPLICANT does not move-in. APPLICANT will remain legally bound by the terms and conditions of the lease.
3. If this application is approved, the APPLICANT agrees to execute an apartment lease. Upon approval, the APPLICANT will pay the **HOLDING FEE within 3 days of notification**. Upon move-in, the holding fee will be applied to the security deposit. If the APPLICANT fails to execute a lease or cancels, then the **HOLDING FEE will be retained as liquidated damages AND WILL NOT BE REFUNDED**.

APPLICANT SIGNATURE: _____ DATE _____

| | |
|--|-----------------------------|
| Office Use Only: Apartment Address: _____ | Move-In Date _____ |
| Date Approved _____ Rent _____ Deposit _____ | Date Deposit Received _____ |

Applicant submits herewith a non-refundable payment in the amount of \$25 (single applicant) or \$50 (married couple) [fee effective 7-1-09] for credit check and processing charge. If application is not approved, said sum will be retained by management to cover the cost of processing the application. NOTE: Application must be signed before it can be processed by management.

SELECT METHOD OF PAYMENT

_____ Check or money order in the amount of \$25 _____ \$50 _____ is enclosed
(select one)

_____ Credit Card Payment (complete information below)

I authorize Andover Management Corporation to charge my credit card in the amount of: \$25 _____ / \$50 _____ / Other \$ _____ (specify amount)

Name as it appears on the credit card

Billing address for the credit card

City, State and Zip Code

Credit Card Number

Card Type VISA MASTERCARD (circle one)

Expiration Date MM/YYYY

Signature of cardholder