

East Gate Apartments LLC.

201 West Genesee St #129
Fayetteville, N.Y. 13066
Phone: (315) 656-7121
Fax: (315) 656-3548

FOR OFFICE USE ONLY

DATE _____

PROPERTY _____

APT. NO. _____ RENT \$ _____

AGENT _____

Please complete all requested information on the front and back of this form. Thank you for your interest in our apartments.

Date of Application: ____ / ____ / ____ Desired Date of Occupancy ____ / ____ / ____

Type and Size of Apartment Wanted (No. Bedrooms, Etc.) _____

PERSONAL INFORMATION

APPLICANT'S FULL NAME _____ Date of Birth ____ / ____ / ____

Social Security No. _____ Driver's License No. /State _____

CO-APPLICANT'S FULL NAME _____ Date of Birth ____ / ____ / ____

Social Security NO _____ Driver's License No. /State _____

Full Names of All Other Residents	Relationship to You	Date of Birth

How did you hear about our property?(CIRCLE ONE) Sunday paper, Penny saver, Apartments living, Craig's list, tenant, Other

RESIDENCE HISTORY

PRESENT ADDRESS Street # _____ Street Name _____ Zip code _____

Present Telephone () _____ - Cell Phone () _____ - email _____

Present Landlord or Mortgage Co. _____ Telephone () _____

Monthly Payment \$ _____ Reason for Moving _____

PREVIOUS ADDRESS _____

Present Telephone _____ Dates From: _____ To: _____

Present Landlord or Mortgage Co. _____ Telephone _____

Monthly Payment \$ _____ Reason for Moving _____

EMPLOYMENT HISTORY

PRESENT EMPLOYER _____

Employer's Address _____ Telephone _____

Position _____ Supervisor _____ Gross Monthly Salary & _____

PRESENT EMPLOYER _____

Employer's Address _____ Telephone _____

Position _____ Supervisor _____ Gross Monthly Salary & _____

CO-APPLICANT'S EMPLOYER _____

Employer's Address _____ Telephone _____

Position _____ Supervisor _____ Gross Monthly Salary & _____

BANKING AND CREDIT HISTORY

BANK NAME & BRANCH _____ Telephone _____

Checking Acct. No _____ Savings Acct No _____

Loan Acct. No _____ Monthly Payment \$ _____

CREDIT REFERENCE _____ Telephone _____

Address _____ Account No _____

CREDIT REFERENCE _____ Telephone _____

Address _____ Account No _____

OTHER REFERENCE _____

Address _____

OTHER INFORMATION

TOTAL NUMBER OF VEHICLES (Including Company Vehicles) _____

Make/Model _____ Year _____ Color _____ Tag No./ State _____

Make/Model _____ Year _____ Color _____ Tag No./ State _____

Other Car, Motorcycle, etc. _____

Total Gross Monthly Household Income \$ _____

If there are other sources of income you would like us to consider, please list income, source and person' (Banker, Employer, etc.) who we could contact for confirmation. You do not have to reveal alimony, child support or spouse's annual income unless you want us to consider it in this application.

Amount \$ _____ Per _____ Source _____ Telephone _____

Amount \$ _____ Per _____ Source _____ Telephone _____

Comments : _____

HAVE YOU OR CO-APPLICANT EVER: Been sued for non-payment of rent? Yes No

Been evicted or asked to move out? Yes No Broken a Rental Agreement or Lease? Yes No

Been sued for damage to rental property? Yes No Declared Bankruptcy? Yes No

In Case of Personal Emergency, Notify: _____ Relationship _____

Address _____ Home Phone _____ Work Phone _____

I hereby make application for an apartment and certify that this information is correct. I authorize you to contact any references that I have listed. I also authorize you to obtain my consumer credit report from your credit reporting agency which will appear as an inquiry on my file.

***PLEASE NOTE: IF A DEPOSIT IS GIVEN TO HOLD AN APARTMENT AND THE APPLICANT CANCELS; THEN THE DEPOSIT WILL BE FORFEITED**

APPLICANT'S SIGNATURE _____ CO-APPLICANT'S SIGNATURE _____

DATE SIGNED: _____ DATE SIGNED: _____

FOR OFFICAL USE ONLY-DO NOT WRITE BELOW

Date Application Received _____ Received By _____

REFERENCE VERIFICATION	REMARKS	THIS APPLICATION: <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved
		Date _____
CREDIT (1)		By _____
		Assigned Apt # _____ Rent \$ _____
PRESENT LANDLORD		Apartment Address _____
		Applicant Notified By _____
PREVIOUS LANDLORD		Anticipated Move In Date _____
EMPLOYMENT		