

Salt Ledge Apartments
1 Pleasant Street
Cohasset, MA 02025

Move In Date:

Rental Rate: \$

Sec Dep \$

Apt. #

All persons to occupy apartment must fill out an application.

Please help us properly process this application by clearly completing all of the required information.

Personal Information

Last Name	First Name	Middle Initial	Marital Status S M D W	Social Security #
Driver's License Number/State	Date of Birth	Email Address:	Cell Phone:	
Present Address		City	State	Zip
How Long?	Rent : Yes No Rent: \$	Own: Yes No Mtg. Amt. \$	Home Phone:	Work Phone:
Landlord's Name:		Address:		Landlord's Phone Number
Previous Address		City	State	Zip
				How Long?

Have you ever (1) Been sued for non-payment of rent? ☐ Yes ☐ No (2) Been evicted or asked to move-out? ☐ Yes ☐ No
(3) Broken a Rental Agreement/ Lease? ☐ Yes ☐ No (4) Been sued for damage to rental property? ☐ Yes ☐ No

Name of Person to Contact in Case of Emergency		Relationship:	
Address:		Home:	Work:
List all other persons to occupy apartment		Relationship	Social Security Number
Date of Birth			
1. Name:			
2. Name:			
3. Name:			

Employment Information

Present Employer:		How Long?	☐ Full ☐ Part-Time	Salary: \$ Per: WK MO YR
Address:		City:	State:	Zip:
Position:	Immediate Supervisor:		Phone Number:	
Previous Employer:		How Long?	☐ Full ☐ Part-time	Salary: \$ Per: WK MO YR
Address:		City:	State:	Zip:
Position:	Immediate Supervisor:		Phone Number:	

Credit and Banking Information

Major Credit Card #1		Account #
Major Credit Card #2:		Account #
Other Income (Optional – If there are any other sources of income you would like us to consider, please list income, source and person we can contact to verify) Amount of Income \$ per month Source: Telephone:		
Bank Accounts		
Bank Name #1		Account #
		Type: Savings Checking MM
Bank Name #2		Account #
		Type: Savings Checking MM
Bank Name		Loan Acct. #
		Monthly Payment \$

Have you ever declared Bankruptcy? ☐ Yes ☐ No If yes, when?

References

Personal References Give at least three (3). **Please NO relatives.**

Name:	Address:		
Phone Numbers	Home:	Work:	Relationship:
Name:	Address:		
Phone Numbers	Home:	Work:	Relationship:
Name:	Address:		
Phone Numbers	Home:	Work:	Relationship:

Vehicle Information

Vehicle #1

Year:	Make:	Model:	Color:	License Plate #:
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Vehicle #2

Year:	Make:	Model:	Color:	License Plate #:
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Applicant represents that the statements made are true and correct and hereby authorizes verification of employment, financial and personal references given.

We sincerely thank you for your application. How did you hear about us? _____

NO PETS ALLOWED

Applicant authorizes a credit report and/or background check.

All rental payments should be made payable to: 1 Pleasant Street, LLC

Date: _____ Applicant's Signature: _____

We do not discriminate on the basis of race, color, religious creed, national origin, sex, sexual orientation, age, children, ancestry, marital status, veteran history, public assistance reciprocity, mental or physical handicap.

For Office Use Only – Do Not Write Below

Date Application Received: _____ Received by: _____

Reference Verification	Remarks
☐ Landlord Verification	
☐ Employer Verification	
☐ Bank Info	
☐ Credit	
☐ Copy of License	
☐ Personal References	
☐ Credit Data Report	
☐ Other	