Hamilton Arms Apartments Rental Application Form

Tel: (609) 587-0598 • Fax: (609) 587-0598(Call before faxing)

The cost of the background investigation is \$65.00 per applicant. This cost is not rent or deposit and is non-refundable. The sum of <u>s</u> is deposited herewith to secure an apartment reservation on the express understanding that it will be returned to me if this application is not approved. If the application is approved, I agree that the money deposited as an apartment reservation shall be applied toward my security deposit, and that I will enter into a lease on your standard form. Shall I cancel this application; the apartment reservation deposit shall be forfeited. NO PETS ARE ALLOWED.

Last Name	First Na			М.І.	Co-Applicant Last Name	First	Name			M.I.
Date of Birth	Social Security Nu	Imber Home 1	ſelephone	1	Date of Birth	Social Security Nu	ımber	Home Te	lephone	
/ /		()	-	/ /			() ·	-
Current Street Address		City	State	Zip Code	Co-Applicant Current Add	Iress (if different)	City		State	Zip Code
Previous Street Address		City	State	Zip Code	Co-Applicant Previous Ad	dress (if different)	City		State	Zip Code
Length of Residence at Cu	urrent Address	Ever Filed for Eviction?	Own or	Rent?	Length of Residence at C	urrent Address	Ever File Eviction?		Own or	Rent?
		🗌 Yes 🔲 No	🗆 Ow	n 🗌 Rent			🗌 Yes	🗌 No	□ Ow	n 🗌 Rent
Applicants E- Mail Addres	s				Co-Applicant E-Mail Add	iress				

Present Housing Information

			J			
Landlord or Agent Name	Landlord Telephone Number		Co-Applicant Landlord or Agent Name	Landlord Telephone Number		
	()	-		()	-	
Reason for Leaving	Length of Rental	Monthly Rent	Reason for Leaving	Length of Rental	Monthly Rent	

Employment Information

Present Employer Name	Position	Co-Applicant Employer Name	Position
Supervisor Name	Telephone Number	Supervisor Name	Telephone Number
	() -		() -
Employer Address	City State Zip Code	Employer Address	City State Zip Code
Employed	Salary per month	Employed	Salary per month
From To	☐ year	From To	🗖 year

Emergency Contact Information

Name	Telephone Number	Name	Telephone Number	
	() -		() -	
Address	Relationship	Address	Relationship	

Other Information

Car Year / Make / Model		License Plate State / Number	Car Year / Make / Model		License Plate State / Number	
/	/		/	/		
Other Residents (Names/ Date of Birth)			Other Residents (Names/Ages)			
Have you ever been convicted of a crime?	If "Yes", Date of Most Recent	Nature of Conviction	Have you ever been convicted of a crime?	If "Yes", Date of Most Recent	Nature	e of Conviction
🗆 Yes 🗌 No	Conviction?		🗆 Yes 🗌 No	Conviction?		
If "Yes", #:			If "Yes", #:			

Applicant Signature(s)

By signing below, I/we authorize that the above information is correct and complete and hereby authorize Landlord to obtain information it deems desirable in the processing of my application, including; credit reports, civil or criminal actions, rental history, employment/salary details, police and vehicle records, and any other relevant information. If I rent the unit, I understand the information on this form may be maintained in a tenant database for up to 5 (five) years after I vacate the premises. I also understand that the application fee is non-refundable, even if my application is rejected.

Applicant: X	Date:	Co-Applicant: X	Date:	
		OFFICE USE ONLY		
NTN Access Number:	Address/Unit Applied for:	Monthly Rent Amount	for unit applicant is applying for: \$	
Date Screened:	Projected Move-In Date:	Apartment / Unit Type:	Key Deposit: \$	
How did you hear about us?	Newspaper I Rent.com I Yellow P	ages 🔲 Referral, By Whom:	Other:	

How did you hear about us? Newspaper Rent.com Yellow Pages Referral, By Whom: ____