

THE
W^M. M. H^OTCHKISS
COMPANY

A FULL SERVICE REAL ESTATE COMPANY

Mailing address:

P.O. Box 801
New Haven, CT 06503

The Wm. M. Hotchkiss Company
195 Church Street, 10th Floor
New Haven, CT 06510

203-772-3200
www.wmmhotchkiss.com

RENTAL CRITERIA:

Date _____

Name of Property Address

The following must be read and signed by each applicant.

All requested fields on the application must be completed to be considered for processing. It must be signed and dated by each person. All references are checked and verified. Employment and landlords will be contacted to study behavior and payment history. Any history of poor payment history or arrests will be immediate reason for denial. **You must also attach a clear copy of a photo ID for each applicant.**

There is a non-refundable application fee of \$35.00 PER PERSON which will be paid by BANK CHECK OR MONEY ORDER.

CASH AND PERSONAL CHECKS ARE NOT ACCEPTABLE.

PLEASE MAKE PAYABLE TO: The Wm. M. Hotchkiss Company

I have read and understand the above information and I grant permission to perform the background checks.

Print Name

Signature

Date

Print Name

Signature

Date

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Phone: 203-772-3200
Fax: 203-624-2556

RENTAL APPLICATION

Notice: Co-Applicant must complete a separate Rental Application Form

The undersigned hereby makes application to rent unit number _____ located at _____

::::: PLEASE TELL US ABOUT YOURSELF :::

FULL NAME _____ PHONE (____) _____

Date of birth _____ Social Security Number _____ CELL PHONE (____) _____

Name of Co-Applicant _____

Number of Dependents (excluding Co-Applicant) _____ Age of Dependents _____

Other Occupants and Their Relationship _____

Pets (Number and Kind) _____

Email Address _____ *****Please attach a photo copy of Driver's License**

::::: PLEASE GIVE YOUR RESIDENCE HISTORY (Beginning With Most Current) :::::::::::::::::::::::

CURRENT ADDRESS _____

Street _____ City _____ State _____ ZIP _____

Move in Date _____ Rent amount \$ _____ Reason for leaving _____

Owner or Agent _____ Phone () _____

PREVIOUS ADDRESS _____

Street _____ City _____ State _____ ZIP _____

Move in Date _____ Rent Amount \$ _____ Move out date _____ Reason for leaving _____

Owner or Agent _____ Owner or Agent Phone () _____

PREVIOUS ADDRESS _____

Street _____ City _____ State _____ ZIP _____

Move in Date _____ Rent Amount \$ _____ Move out date _____ Reason for leaving _____

Owner or Agent _____ Owner or Agent Phone () _____

::::: PLEASE GIVE US YOUR EMPLOYMENT INFORMATION :::

YOUR STATUS: ___ Employed Full Time ___ Employed Part-Time ___ Student ___ Retired ___ Unemployed

EMPLOYER ___ Current _____

Date(s) Employed _____ Position _____

Supervisor _____ Supervisor's phone () _____

Address _____

Salary \$ _____ per _____

If employed by above less than 6 months, give name and address of previous employer or school

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 \$ _____ Source _____

If I am accepted for rental of this unit, I understand that when I sign the lease I will be required to bring the following:

1. Written proof that the utilities have been transferred to my/our name(s) as of the beginning day of the lease.
2. Certificate of Insurance showing Renter's insurance coverage as required.

::::: PLEASE LIST YOUR BANK AND CREDIT REFERENCES :::

| Your Bank(s) | City, State | Branch | Type of Account | Account Number |
|--------------|-------------|--------|-----------------|----------------|
| 1 _____ | | | | |
| 2 _____ | | | | |

| Credit References | City, State | Account Numbers |
|-------------------|-------------|-----------------|
| 1 _____ | | |
| 2 _____ | | |
| 3 _____ | | |

:::

YOUR DRIVER'S LICENSE NUMBER * _____ STATE _____

* (Please submit a photo copy of your driver's license with this application)

YOUR VEHICLE MAKE/MODEL _____ YEAR _____ TAG NUMBER _____ STATE _____

SECOND VEHICLE MAKE/MODEL _____ YEAR _____ TAG NUMBER _____ STATE _____

OTHER VEHICLES _____

| | | | |
|----------------|--|----------|-----------|
| HAVE YOU EVER: | Filed for bankruptcy? | _____ No | _____ Yes |
| | Been evicted from tenancy? | _____ No | _____ Yes |
| | Willfully or intentionally refused to pay rent when due? | _____ No | _____ Yes |

:::

Please give any additional information which might help management evaluate this application:

I RECOGNIZE THAT AS PART OF YOUR PROCEDURE FOR PROCESSING MY APPLICATION, AN INVESTIGATIVE CONSUMER REPORT MAY BE PREPARED WHEREBY INFORMATION IS OBTAINED THROUGH PERSONAL INTERVIEWS WITH MY NEIGHBORS, FRIENDS, AND OTHERS WITH WHOM I MAY BE AQUAINTED. THIS INQUIRY INCLUDES INFORMATION AS TO MY CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS, AND MODE OF LIVING. I UNDERSTAND THAT I MAY HAVE THE RIGHT TO MAKE A WRITTEN REQUEST WITHIN A REASONABLE PERIOD OF TIME TO RECEIVE ADDITIONAL, DETAILED INFORMATION ABOUT THE NATURE AND SCOPE OF THIS INVESTIGATION.

The above information, to the best of my knowledge, is true and correct.

Signature of Applicant _____ Date Signed _____