

Summit Property Management Trust PO Box 248,
Raynham, MA, 02767

Apartment Rental Application

- **Income verifications** - For Example: Paystubs, Schedule C, Offer Letter, Social Security, benefit payments, Child Support, Alimony, any other source of income you'd like to disclose.
- **References** - Landlord, Personal, Employer
- **Government Issued Picture ID** - required
- **Copy of your Housing Voucher** (if applicable)

Thank you! Please scan and email all completed applications to Pat@summitpropertiesllc.com

Application for Residency

DATE: _____

Phone #: _____

Email: _____

Personal Information:

First Name: _____ Middle Initial: _____ Last Name: _____ Suffix: _____

Maiden or Former Last Name: _____

Date of Birth: _____ Social Security Number: _____

Driver's License Number: _____ State Issued: _____

Number of Occupants Applying: _____

Occupant Information:

Name: _____ D.O.B: _____ S.S. #: _____ Relationship: _____

Name: _____ D.O.B: _____ S.S. #: _____ Relationship: _____

Name: _____ D.O.B: _____ S.S. #: _____ Relationship: _____

Name: _____ D.O.B: _____ S.S. #: _____ Relationship: _____

Residence Information:

Current Address: _____ Suite/Apt#: _____

City: _____ State: _____ Zip Code: _____

Rent/Own: _____ Dates of Residency: From: _____ To: _____

Landlord Name: _____ Landlord Phone #: _____

Monthly Rent Amount: _____ Reason for Moving: _____

Previous Address: _____ Suite/Apt#: _____

City: _____ State: _____ Zip Code: _____

Rent/Own: _____ Dates of Residency: From: _____ To: _____

Previous Landlord Name: _____ Previous Landlord Phone: _____

Monthly Rent Amount: _____ Reason for Moving: _____



Application for Residency

Employment Information:

Current Employer (As of Move In Date): _____ Position: _____
Address: _____ City: _____ State: _____ Zip: _____
Supervisor: _____ Supervisor Phone #: _____
Dates of Employment: From: _____ To: _____ Monthly Income: _____
Additional Income: _____ Source of Additional Income: _____

Eviction/Conviction Information:

Have you ever been evicted or asked to move out? YES _____ NO _____
If "yes" where? _____ If "yes" when? _____
If "yes" please explain: _____
Have you ever been convicted of or "Plead Guilty" or "No Contest" to a misdemeanor or Felony? YES _____ NO _____
If "yes" where? _____ If "yes" when? _____
If "yes" please explain: _____

Authorization. I authorize the landlord, agent, or Management Company to contact all references listed above to obtain information about me and to obtain a copy of my credit report and criminal offender record information (CORI), if available. If my application is denied based upon my credit report, I will be informed of the specific reason either by letter, telephone, or email provided above. I agree that the landlord or management company may terminate any tenancy made in reliance on any misstatement made in this application. I understand that is no agreement to rent until and lease or tenancy agreement is signed by the landlord or management company.

By signing this application, I certify that all persons over eighteen years of age who will be occupying the apartment home have completed and provided to us a separate application for residency, and that each such occupant of the apartment home will sign the Lease at the time required.

You authorize us, through our designated agent or employees, to obtain and verify all credit information for the purpose of determining whether or not to lease the apartment home to you. You understand that should you enter into the lease for the apartment home, we and our designated agents and employees will have a continuing right to review your credit information, rental application, payment history and occupancy history for account review purposes and for improving application methods.

By signing this Application, you certify that all information contained in this application is true, correct and complete.

It is unlawful to discriminate against an applicant or tenant because of their race, color, national origin, religion, gender, familial status, disability, or any other basis that may be protected under applicable state or local law.

Signature of Applicant

_____/_____/_____
Date

Signature of Management

_____/_____/_____
Date

FOR OFFICE USE ONLY:

Approved/Declined By _____

Approval/Declined Date _____



Additional questionnaire

1. Do you have Pets? _____ Yes, Type _____
2. Do you have renter's insurance? __ *You should consider purchasing renters insurance for yourself and your personal belongings.*
3. Have you ever broken a lease? _____ yes, why _____
4. Have you ever refused to pay rent for any reason? If so, why? _____
5. Have you ever been evicted or asked to leave a rental unit? _____
6. Have you filed for bankruptcy within the past 10 years? _____
7. Do you currently have any utilities in your name? _____
8. Is there anything to prevent you from placing utilities in your name? __

9. Any reasons that may interrupt your ability to pay rent? _____
10. Have you defaulted on a loan, utility, credit card, store charge or other credit in the past 10 years? _
_____ if yes,
explain _____
11. Have you had a loan, utility, credit card, store charge or other credit placed for collection in the past
10 years? _____
if yes, explain _____
11. Do you have a housing voucher? If so please specify which housing authority, how long you have had the
voucher, and the size of your voucher. _____

Additional information:

Tenant Signature _____ Date: _____