EAST COAST PROPERTIES



Address:





MAIN OFFICE 100 Kings Park Drive Liverpool, New York 13090 (315) 622-2740

RENTAL APPLICATION

APPLICANT: Thank you for your application. We ask that you clearly complete this application in full to assist us in processing it for you. Any application that is not completed in full will be deemed as incomplete and is subject to rejection. Date of Application: Desired Move-In Date: Type and Size of Unit Desired: PERSONAL INFORMATION Applicant's Full Name: Social Security No.: Date of Birth: ☐ Married ☐ Separated ☐ Divorced ☐ Single **Marital Status:** Spouse's/Co-Resident's Name: (Co-Residents or Spouse Must Complete Separate Application) Relationship ** Occupants ** ** Any or all Occupants 18 years or older must complete a separate application. Have you ever been convicted of a felony? Yes \square No □ Have you ever been convicted of a sexual offense? Yes \square No \square Yes \square No □ Have you ever been convicted for possession, use or sale of illegal substances? EMERGENCY NOTIFICATION (IN CASE OF EMERGENCY NOTIFY) Name Relationship: Telephone:

PRESENT ADDRESS:	(Please indicat	e your current o	address in full)			
House/PO Box/Apartm	ent Number	S	Street			
City		State	Z	ip		
Present Telephone		Cell #	Le	ength of time a	at present address	3
Present Landlord or Mo	ortgage Holder Na	me		Telepho	ne	
Amount of Don't			Danaa faa mari			
Amount of Rent \$			Reason for moving	ng		
PREVIOUS ADDRESS:	(Required if no	t at present add	ress for at least on	e vear)		
House/PO Box/Apartm			Street	c year)		
City		State	Zip			
5						
Length of time at previous	ous address					
Previous Landlord or M	Iortgage Holder N	ame		Teleph	ione	
Amount of Rent \$			Reason for movin			
	EMP	LOYMENT	INFORMAT	ION		
PRESENT STATUS:	☐ Full-Time [☐ Part-Time ☐	☐ Unemployed □	Retired	Student	
EMPLOYED BY:					How Long?	
Employer's Address						
Position Held			Phone Cor	ntact		
1 OSITION FICIG			1 Hone Col	inact		
Supervisor	P1	hone Contact	Gro	oss Income \$		per month
T. P. C. C.						
ADDITIONAL EMPLOYMENT						
PRESENT STATUS:	☐ Full-Time	☐ Part-Time				
EMPLOYED BY:					How Long?	
Employer's Address						
Position Held			Phone Cor	ntoot		
Position Heid			Filone Co.	iitact		
Supervisor	Ph	one Contact	Gr	oss Income \$		per month
Supervisor			MPLOYMEN	· ·		Per monen
(Required if current employment is less than six months)						
		-				
PREVIOUS STATUS:	☐ Full-Time	☐ Part-Time	☐ Unemployed	☐ Retired	☐ Student	
EMPLOYED BY:				How Lo	ong?	
Docition II-14			D		¢	
Position Held			Previous (Gross Income	Ф	per month

Address of School Present Grade Level		Evnected I	Date of Graduation	
Flesent Grade Level		Expected I	Pate of Graduation	
student please attach docum	entation on how	you intend to pay	rent each month. [Stipend, Pare	ents, Other]
		VEHIC	I FC	
UMBER OF VEHICLES (Including Comp		LLS	
Make/Model	Year	Color	License plate #	State
Take/Model	Year	Color	License plate #	State
	ADDI	TIONAL IN	FORMATION	
lease provide any other infor			lp us to evaluate your application	n:
	-			

PLEASE READ CAREFULLY

Applicant represents that all of the above statements are true and complete, and hereby authorizes verification of above information, references and credit records. Applicant acknowledges that false information herein may constitute a criminal offense under the laws of this state. Applications which are incomplete may result in an application being rejected. Applicant understands that the application becomes the property of East Coast Properties once submitted.

Applicant has reviewed our rental policy statement.

Applicant shall, within seven (7) days of lease start date, sign Landlord's lease and if he fails to do so, the application may be deemed by the Landlord as having been withdrawn, in which case, the Landlord may retain the deposit paid hereunder as liquidated damages.

Upon signing of the lease, the deposit paid on the signing of this application is to become a security deposit. This deposit is not intended to take the place of any part of rent.

The applicant understands that he has no rights hereunder until this application is approved by the Landlord and Lease is signed by both parties in accordance with terms herein.

If applicant is rejected, the Landlord shall return the applicant's deposit and there will be no further rights in favor of either party.

It is a material Breach of Lease if Tenant violates the No Pet Clause, and if this violation occurs, Tenant agrees to pay to Landlord as liquidating damages the sum of \$1,000. Landlord reserves all rights pertaining to this material breach.

AUTHORIZATION OF APPLICATION

DI EACE DEAD CADEELLI VE	EFORE CICNING.			
PLEASE READ CAREFULLY B	EFORE SIGNING:			
In considering this application fr	om you, management will rely heavily on the information which you have			
supplied. It is important that the information is accurate and complete. By signing this application you agree to				
the terms of the application. Additionally, you represent and warrant the accuracy of the information and				
authorize management to verify a	ny references that you have listed.			
Signed:	Date:			
	IF FOR ANY REASON			
YO	U CHOOSE NOT TO TAKE APARTMENT			
DEPOSIT A	AND APPLICATION FEE ARE NON-REFUNDABLE			

DISPOSITION OF APPLICATION

Approved □ Not Approved □	By:	Date:
If not approved, indicate reason(s):		
Applicant notified by:		Date notified:
Notes:		