



**APPLICANT:**

Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Email Address \_\_\_\_\_

Present Address \_\_\_\_\_  
Street Apt# City State Zip

Dates From \_\_\_\_\_ To \_\_\_\_\_

Present Landlord/Resident Mgr. \_\_\_\_\_

Apt. Name/If Home-Mortgage Co. \$ Loan # \_\_\_\_\_

Monthly Payment \_\_\_\_\_ Reason for Moving \_\_\_\_\_

Have you ever been evicted from any leased premises? \_\_\_\_\_ If yes, explain:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Previous Address \_\_\_\_\_  
Street Apt# City State Zip

Previous Apt. Name or Landlord \_\_\_\_\_  
Address Phone How long?

Monthly Payment \_\_\_\_\_ Reason for Moving \_\_\_\_\_

**APPLICANT EMPLOYER:**

Name \_\_\_\_\_ Phone \_\_\_\_\_ Position \_\_\_\_\_

Business Address \_\_\_\_\_  
Street City State Zip

Supervisor \_\_\_\_\_ Employed Since \_\_\_\_\_ Gross Weekly Salary \_\_\_\_\_

Previous Employer \_\_\_\_\_ Phone \_\_\_\_\_ Position \_\_\_\_\_

Business Address \_\_\_\_\_

Supervisor \_\_\_\_\_ Employed Since \_\_\_\_\_ Gross Weekly Salary \_\_\_\_\_

Additional Monthly Income (if any) \_\_\_\_\_ Source \_\_\_\_\_

**BANKING INFORMATION:**

Bank Name and Branch \_\_\_\_\_  Checking

Bank Name and Branch \_\_\_\_\_  Savings

**CREDIT INFORMATION:**

Name \_\_\_\_\_ Type \_\_\_\_\_ Acct.# \_\_\_\_\_ Mo. Payment \_\_\_\_\_ Open  Closed

Name \_\_\_\_\_ Type \_\_\_\_\_ Acct.# \_\_\_\_\_ Mo. Payment \_\_\_\_\_ Open  Closed

Name \_\_\_\_\_ Type \_\_\_\_\_ Acct.# \_\_\_\_\_ Mo. Payment \_\_\_\_\_ Open  Closed

**VEHICLE INFORMATION:**

Year            Make            Model            Color            License Plate #            State            Registered To

Year            Make            Model            Color            License Plate #            State            Registered To

**Have you declared bankruptcy in the past 7 years? \_\_\_\_\_ If yes, explain:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Has a judgment ever been granted against you? \_\_\_\_\_ If yes, explain:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMERGENCY CONTACT INFORMATION:**

**Nearest relative (not living with you)**

Name                            Address                            Telephone #                            Relationship

**Secondary party to contact in case of emergency (not living with you)**

Name                            Address                            Telephone #                            Relationship

I or we authorize Hudson Highlands Properties, LLC to verify all information on the rental application by all available means, including consumer reporting agencies, public records, current and previous rental property owners, employers and personal references. Re-verification of preliminary findings is not required.

**APPLICANT SIGNATURE** \_\_\_\_\_ **Date** \_\_\_\_\_

**OFFICIAL USE: LEASE INFORMATION**

Beginning Date \_\_\_\_\_ Ending Date \_\_\_\_\_ Move-In Date \_\_\_\_\_

Size of Apt. \_\_\_\_\_ Monthly Rental \_\_\_\_\_ Yearly Rental \_\_\_\_\_

Pro Rate \_\_\_\_\_ Reservation Fee \$ \_\_\_\_\_

Balance Due Upon Execution of Lease by Certified Check or Money Order \$ \_\_\_\_\_

Security Deposit \$ \_\_\_\_\_

**APPLICATION TAKEN BY** \_\_\_\_\_ **Date** \_\_\_\_\_

**APPLICATION DATE** \_\_\_\_\_ **UNIT TYPE** \_\_\_\_\_ **MONTHLY RENTS** \_\_\_\_\_

**MOVE IN DATE** \_\_\_\_\_ **AFTER 2:00 PM** \_\_\_\_\_

**PET** YES  NO  **TYPE** \_\_\_\_\_

**BREED** \_\_\_\_\_ **WEIGHT** \_\_\_\_\_ **NAME** \_\_\_\_\_

