



APPLICATION TO RENT

Albany College of Pharmacy and Health Science

APPLICANT PERSONAL INFORMATION:

PLEASE PRINT ALL INFORMATION

Applicant:

Name: _____ DOB: _____ SS#: _____

Applicant's Permanent Address: _____

Applicant's Current Phone Number: _____ Email: _____

Current Landlord's Name: _____ Landlord's Phone No.: _____

Current Landlord's Address: _____

Applicant's Reason for leaving Current Address: _____

Does Current Landlord know you are leaving the apartment/house? Yes _____ No _____

Prior Landlord's Name: _____ Landlord's Phone No.: _____

Prior Landlord's Address: _____

Applicant's Reason for leaving Prior Address: _____

Guarantor for Applicant, please complete the following:

Name: _____ DOB: _____ SS#: _____

Current Address: _____

Guarantor's Current Phone Number: _____ Email: _____

Prior Landlord's Address: _____

Applicant's Reason for leaving Prior Address: _____



EMPLOYMENT/INCOME:

Applicant:

Applicant's Current Employer/ Source of Income: _____

Phone No.: _____

Business Address: _____ Position.: _____

Supervisor: _____ Employed since: _____

Gross Monthly Salary/Income \$ _____ Frequency of Wages/Income: _____

Guarantor:

Guarantor's Current Employer/Source of Income: _____

Phone No.: _____

Business Address: _____ Position.: _____

Supervisor: _____ Employed since: _____

Gross Monthly Salary/Income \$ _____ Frequency of Salary/Income: _____

FINANCIAL INFORMATION:

Applicant:

Applicant's Checking Account Bank name and City: _____

Applicant's Savings Account Bank name and City: _____

Do you have any credit cards? Yes _____ No _____

If yes, please check appropriate card: Mastercard _____ Visa _____ American Express _____ Other _____

Guarantor :

Applicant's Checking Account Bank name and City: _____

Applicant's Savings Account Bank name and City: _____

Do you have any credit cards? Yes _____ No _____

If yes, please check appropriate card: Mastercard _____ Visa _____ American Express _____ Other _____

TENANT VEHICLE INFORMATION:

Applicant #1

Type of vehicle: _____ Make: _____ Model: _____

Year: _____ Color: _____ VIN: _____

License Plate: _____ State currently registered in: _____

Domestic Partner, if applicable, only needed if renting 2 BR unit for 2 Adults

Type of vehicle: _____ Make: _____ Model: _____

Year: _____ Color: _____ VIN: _____

License Plate: _____ State currently registered in: _____



REAL ESTATE OWNED:

Applicant

Do you own any real estate? Yes _____ No _____

If yes, please list type of real estate and address: _____

Guarantor:

Do you own any real estate? Yes _____ No _____

If yes, please list type of real estate and address: _____

PERSONAL REFERENCES:

Applicant #1

Name: _____

Address: _____

Telephone #: (_____) _____

Relationship to Applicant: _____

Name: _____

Address: _____

Telephone #: (_____) _____

Relationship to Applicant: _____

Guarantor:

Name: _____

Address: _____

Telephone #: (_____) _____

Relationship to Applicant: _____

Name: _____

Address: _____

Telephone #: (_____) _____

Relationship to Applicant: _____

MISCELLANEOUS:

Applicant

Have you ever been charged with or convicted of a crime? Yes _____ No _____

If yes, please provide details: _____

Guarantor:

Have you ever been charged with or convicted of a crime? Yes _____ No _____

If yes, please provide details: _____

IDENTIFICATION:

Applicant

Driver's License No.: _____ Passport: _____ Other: _____



EMERGENCY:

Applicant

In case of emergency notify: Name: _____ Telephone _____
#: _____

Address: _____ Relationship: _____

Name: _____ Telephone _____

#: _____

Address: _____ Relationship: _____

Guarantor;

In case of emergency notify: Name: _____ Telephone _____

#: _____

Address: _____ Relationship: _____

Name: _____ Telephone _____

#: _____

Address: _____ Relationship: _____

SIGNATURES:

Please read the following prior to signing this Rental Application.

I warrant that the information supplied is true and correct, and that I am at least 18 years of age. I have been informed that the owner is a member of the Vermont Apartment Owners Association, LLC, and may check my credit with a credit reporting agency to evaluate my qualifications as a potential tenant; to evaluate my qualifications if the lease is to be renewed; and for rent collection purposes if required. Any information derived from credit reports or other sources will be kept confidential and not revealed to any outside party.

I hereby acknowledge that false information given in this Rental Application may constitute grounds for rejection of this application and termination of your lease.

I, the undersigned Applicant(s), have read and agree to all provisions of this Rental Application.

Applicant: Signature: _____ Date: _____

Guarantor: Signature: _____ Date: _____

For Staff use

AVAILABLE UNIT:

Name of Building: _____

Apartment Address: _____

Rent: \$ _____ * Security deposit: \$ _____ * Move In date: _____

Guaranty: _____ Ins or Waiver : _____ Financial Aid Verification: _____

Disbursement Letter Required: _____ Disbursement Letter Rec'd _____ term 1, _____ term 2 _____

Key Fob Assigned: _____ Door Code Assigned : _____

Wireless ID: _____

Severance Corners Village Center, LLC – 104 Severance Green, Colchester, VT 05446
Mailing: PO Box 2286, S. Burlington, VT 05407, tel: 802-872-0019



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