

# WEATHERHEADS RENTAL APPLICATION

Ralph W. Semb, 55 French King Highway, Erving, MA 01344

Business 413-423-3831 Cell 413-883-7136

**WE ARE A NON SMOKING FACILITY**

## Apartment Information

65 French King Highway Apt. \_\_\_\_\_

Rent: \$ \_\_\_\_\_ Last Months Rent \$ \_\_\_\_\_

Security Deposit \$ \_\_\_\_\_ Move in date: \_\_\_\_\_

## Applicant Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Social Security#: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

License: \_\_\_\_\_

Will any children under age 18 be living with you? yes or no (circle one)

How many: \_\_\_\_\_ Ages: \_\_\_\_\_

## Current address

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Own or Rent (Please circle) Monthly payment or rent: \$ \_\_\_\_\_

Landlord: \_\_\_\_\_ Phone: \_\_\_\_\_

Start date: \_\_\_\_\_ End Date: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

## Employment Information

Current employer: \_\_\_\_\_

Position: \_\_\_\_\_

Manager: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Start date: \_\_\_\_\_ End date: \_\_\_\_\_

Monthly pay: \$ \_\_\_\_\_

## Personal References

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

