

RENTAL APPLICATION

DIRECTIONS:

Complete this application in its entirety and as accurately as possible. Incomplete or unsigned application could result in rejection. Please return application along with the below information to: Community Progress Inc. 147 East Second St. Corning, NY 14830

When submitting this application, please provide the following:

- > 1 check/money order in the amount of **\$20.00** for the application fee which is **non-refundable**.
- Copy of a valid driver's license or valid identification for the applicant and co-applicant if applicable.
- > 1 month of pay stubs for the applicant and co-applicant if applicable.
- > Proof of credit score. Credit score must be 650 or higher.

Upon acceptance of the rental application, the applicant must submit the initial deposit of one month rent and a security deposit.

RENTAL ADDRESS: 213 LIBERTY ST., BATH NY. 14810 APARTMENT # _____

RENT AMOUNT: \$ +	UTILITIES		
DESIRED MOVE IN DATE:			
Personal Information			
Name:			
First	Middle	Last	
Social Security #			
List any other alias used by you:			
		_	
E-mail address:			
DI			

Phone #:_____



List full names of all other persons who will occupy premises:

First	Middle		Last	Age
First	Middle	· · · · · · · · · · · · · · · · · · ·	Last	Age
Co-Applicant				
Name:				
First	Middle	•	Last	
Social Security #				
ist any other alias used by you:	:			
E-mail address:				
Phone #:				
<u>I</u>	Residence and Re	ental Record		
Applicants Current Address:				
Street Address	Apt. #	City	State	Zip
Date of Occupancy: From	n:/	_/ to:	/	/
Landlords Name:				
Landlord's Phone #:		_		



Previous Address:

	Street Address	Apt. #		City	State	Zip
	Date of Occupancy: From: _	/	/	to:	/	/
	Landlords Name:					
	Landlord's Phone #:					
2 nd Pre	evious Address:					
	Street Address	Apt. #		City	State	Zip
	Date of Occupancy: From: _	/	/	to:	/	/
	Landlords Name:					
	Landlord's Phone #:					
Co- Ap	oplicant's Current Address:					
	Street Address	Apt. #		City	State	Zip
	Date of Occupancy: From: _	/	/	to:	/	/
	Landlords Name:					
	Landlord's Phone #:					
Previo	us Address:					
	Street Address	Apt. #		City	State	Zip
	Date of Occupancy: From: _	/	/	to:	/	/
	Landlords Name:					
	Landlord's Phone #:					



2nd Previous Address:

Street Address	Apt. #		City	State	Zip
Date of Occupancy: From: _	/	/	to:	//	/
Landlords Name:					
Landlord's Phone #:					
	<u>Employm</u>	ent Reco	ord		
Total gross household income (am	ount before	taxes are	taken out) f	rom ALL source	es:
\$					
Applicants present employer:		, s	upervisor:		
Address:					
Street Addre	SS	City		State	Zip
Phone #:	, Occupat	tion:			
Monthly Income: \$, How long h	ave you be	en employe	d?	
	_	·			
.			- ·		
Co-Applicants present employer: _			_, Superviso	r:	
Address:					
Street Addre	SS	City		State	Zip
Phone #:	, Оссира	ation:			,
Monthly Income: \$, How long h	ave you be	en employe	d?	



Checking Account:

Bank information

-					
Bank Name:	, Branch:				
Savings Account:					
Bank Name:	, Branch:				
Criminal Background					
Have you ever: Filed for bankruptcy? If yes, list da	te med:				
Been served an eviction notice or been asked to vacate a property you were renting? If yes, when?					
Willfully or intentionally refused to pay rent when due? If yes, when?					
Been sued for unlawful detainer? If yes, when?					
Been convicted of or committed a felony? If yes, what?					
Been charged or arrested for drug possession or sale?					

Miscellaneous

Rear Parking Available

Garage units available – An additional \$50/month. Only one bay per tenant unless others are available. However, if a new tenant wishes to lease a garage and none are available, you are required to surrender one of the units at the end of your lease.

Pets: Pets or reptiles of ANY type/kind are **NOT** permitted.

IMPORTANT NOTICE REGARDING YOUR LEASE EXPIRATION DATE

Lease term is 12 month or 1 year Leases will not be allowed to expire on a federal holiday. In such case, the lease will expire three (3) calendar days prior to the holiday.



Please read the following carefully

- In the event this application is not accepted by Community Progress Inc. (CPI), the Application fee will not be returned.
- CPI does not insure tenant's personal property. All tenants are encouraged to obtain renter's insurance for their own protection.

Applicant acknowledges that this application has personally been filled out by the applicant and the information provided is true and complete. Applicant authorizes verification of any information contained in this application and may include verification from a consumer credit reporting agency. **The deposit paid is** <u>not refundable after 72 hours</u>, if this application is approved following verification. Application fee is never refundable. This fee is to be paid by a separate check/money order made payable to: **Community Progress, Inc. and mailed to: 147 East Second St. Corning, NY. 14830**. It is mandatory within five days of acceptance that the tenant arrange a mutually acceptable time with CPI or its representative to sign a lease and pay first month's rent and deposit in certified funds. The security deposit and first month's rent must be paid in full before keys are issued for occupancy. <u>Please Remember</u>: Full Holding Deposit Payment in Certified Funds MUST be paid within five (<u>5</u>) days of signing this application. Failure to meet these provisions will result in loss of all deposits and fees paid to date.

Applicant

Date

Date

Thank you for choosing Liberty Street Rentals

The Housing Expert Since 1970

