

# Rental Application

*A separate application is required from each applicant age 18 or older.*

Date and time received by Landlord \_\_\_\_\_

## THIS SECTION TO BE COMPLETED BY LANDLORD

Address of property to be rented:

\_\_\_\_\_

Rental term:

☐ Month-to-Month ☐ Lease from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

### Amounts Due Prior to Occupancy

First month's rent \$ \_\_\_\_\_

Security deposit \$ \_\_\_\_\_

Credit check fee \$ \_\_\_\_\_

Other (specify): \$ \_\_\_\_\_

TOTAL: \$ \_\_\_\_\_

An Application Deposit of \$\_\_\_\_\_ is to be submitted with this application.

If the Applicant is accepted, this Application Deposit will be credited to the first month's rent.

If the Application is not accepted, or if the Premises are not ready for occupancy by the Applicant on the beginning date specified above, the deposit shall be returned to the Applicant.

The Applicant understands and agrees that if this Application is accepted and the Applicant fails to execute a Lease before the beginning date specified above, or to pay the required deposits and the first month's rent, the application deposit will be forfeited as liquidated damages.

The Applicant understands that the Landlord may perform a credit check to verify the Applicant's credit references and credit history in connection with the processing of this Rental Application.



# PERSONAL FINANCIAL STATEMENT

**Leased Premises:**

**Landlord:**

APPLICANT							
Full Name		Social Security #		Date of Birth		Contact Phone	
Street Address		City/State/Zip			Dependents	Primary ID Type	
ID Issuer		ID #		Issue Date		Expiration Date	
Time at Residence	Own/Rent	Mortg./Rent	Employment/Company		Position		Time
		\$					
CO-APPLICANT							
Full Name		Social Security #		Date of Birth		Contact Phone	
Street Address		City/State/Zip			Dependents	Primary ID Type	
ID Issuer		ID #		Issue Date		Expiration Date	
Time at Residence	Own/Rent	Mortg./Rent	Employment/Company		Position		Time
		\$					
ASSETS & LIABILITIES							
ASSETS:		AMOUNT:	LIABILITIES:			AMOUNT:	
Cash in Bank Accounts		\$	Total Revolving Credit			\$	
Publicly Traded Investments		\$	Total Installment Loans			\$	
Residence Market Value		\$	Mortgage on Residence			\$	
Other Real Estate Owned		\$	Mortgages on Other Real Estate			\$	
Other Assets		\$	Other Liabilities			\$	
Total Assets		\$	Total Liabilities			\$	
<b>Net Worth: \$</b>							
GENERAL INFORMATION							
				APPLICANT	CO-APPLICANT		
1. Have you ever filed bankruptcy or have you been a principal or guarantor of a business entity that filed bankruptcy, or was the debtor in an involuntary bankruptcy case?				Yes / No	Yes / No		
2. Have you ever been convicted of a felony?				Yes / No	Yes / No		
3. Are you obligated to pay alimony, child support, or separate maintenance? (note \$ amount below)				Yes / No	Yes / No		

4. Are you a party to any claims or lawsuits?	Yes / No	Yes / No
5. Are you a co-signer or guarantor of any other debt?	Yes / No	Yes / No

6. Are any of your assets held in trust?	Yes / No	Yes / No
7. Do you own 25% or more of another company?	Yes / No	Yes / No
8. Are you a permanent resident alien?	Yes / No	Yes / No
9. Are you a citizen of the United States?	Yes / No	Yes / No

If you answered "Yes" to Questions 1-8 or "No" to Question 9, please explain:

Guarantor Marital Status: Married / Separated / Unmarried (includes Single, Divorced, Widowed)

Co-Guarantor Marital Status: Married / Separated / Unmarried (includes Single, Divorced, Widowed)

### SOURCES OF INCOME

ANNUAL	APP.	CO-APP.	ANNUAL	APP.	CO-APP.
Salary	\$	\$	Dividends/Interest	\$	\$
Commissions	\$	\$	Rental Income	\$	\$
Cash Distributions (net from individual/business)	\$	\$	Alimony/Child Support (optional)	\$	\$
Other Sources	\$	\$	Other Sources	\$	\$
<b>Total Annual Income:</b>	<b>\$</b>	<b>\$</b>			

### ASSET SCHEDULE 1: CASH IN BANK ACCOUNTS

Account Owner/Description	Name of Bank	Balance
		\$
		\$
		\$
		\$
<i>(list all additional on a separate sheet and attach)</i>		Total \$

### ASSET SCHEDULE 2: PUBLICLY TRADED ASSETS (Stocks, Bonds, ETFs, IRAs, etc)

Account Type/Description	Name Registered In	Shares/Amount	Retirement	Value
			Yes / No	\$
			Yes / No	\$
			Yes / No	\$
			Yes / No	\$
			Yes / No	\$
			Yes / No	\$
<i>(list all additional on a separate sheet and attach)</i>			Total:	\$

### ASSET SCHEDULE 3: MISC. (Vehicles, Boats, Partnerships, Insurance Cash Value, etc)

Description (Vehicles - provide year, make & model)	Name Registered In	Value
		\$
		\$

		\$
		\$
(list all additional on a separate sheet and attach)	Total:	\$

#### LIABILITY SCHEDULE 1: REVOLVING CREDIT (Credit Cards, Credit Lines)

Creditor/Payable To	Description	Monthly Payment	Total Balance
		\$	\$
		\$	\$
		\$	\$
		\$	\$
(list all additional on a separate sheet and attach)	Total:	\$	\$

#### LIABILITY SCHEDULE 2: INSTALLMENT LOANS (Vehicles, Boats, Furniture, etc)

Creditor/Payable To	Description	Monthly Payment	Total Balance
		\$	\$
		\$	\$
		\$	\$
		\$	\$
(list all additional on a separate sheet and attach)	Total:	\$	\$

#### LIABILITY SCHEDULE 3: OTHER DEBTS (Judgments, Tax Debt, Contract Debt, etc)

Creditor/Payable To	Description	Monthly Payment	Total Balance
		\$	\$
		\$	\$
		\$	\$
		\$	\$
(list all additional on a separate sheet and attach)	Total:	\$	\$

#### LIABILITY SCHEDULE 4: CONTINGENT LIABILITIES (Partnerships, Guarantees)

Creditor/Payable To	Description	Monthly Payment	Total Balance
		\$	\$
		\$	\$
		\$	\$
		\$	\$
(list all additional on a separate sheet and attach)	Total:	\$	\$

#### REAL ESTATE SCHEDULE

	Property 1	Property 2	Property 3
Property Type	SFD / Multi / Comm / Land	SFD / Multi / Comm / Land	SFD / Multi / Comm / Land
Property Use	Pr. Res. / 2 <sup>nd</sup> Res. / Inv.	Pr. Res. / 2 <sup>nd</sup> Res. / Inv.	Pr. Res. / 2 <sup>nd</sup> Res. / Inv.
Ownership %			
Co-owned w/Spouse?			
Property Address			
City/State/Zip			

Date Purchased			
Purchase Price	\$	\$	\$
Est. Market Value	\$	\$	\$
1 <sup>st</sup> Mortgage Balance	\$	\$	\$
Lender			
Monthly Payment	\$	\$	\$
Interest Rate			
Maturity Date			
All Other Mortgages/Liens	\$	\$	\$
Lender(s)			
Monthly Payment(s)	\$	\$	\$
Ann. Property Tax & Ins.	\$	\$	\$
Monthly Rental Income	\$	\$	\$
	Property 4	Property 5	Property 6
Property Type	SFD / Multi / Comm / Land	SFD / Multi / Comm / Land	SFD / Multi / Comm / Land
Property Use	Pr. Res. / 2 <sup>nd</sup> Res. / Inv.	Pr. Res. / 2 <sup>nd</sup> Res. / Inv.	Pr. Res. / 2 <sup>nd</sup> Res. / Inv.
Ownership %			
Co-owned w/Spouse?			
Property Address			
City/State/Zip			
Date Purchased			
Purchase Price	\$	\$	\$
Est. Market Value	\$	\$	\$
1 <sup>st</sup> Mortgage Balance	\$	\$	\$
Lender			
Monthly Payment	\$	\$	\$
Interest Rate			
Maturity Date			
All Other Mortgages/Liens	\$	\$	\$
Lender(s)			
Monthly Payment(s)	\$	\$	\$
Ann. Property Tax & Ins.	\$	\$	\$
Monthly Rental Income	\$	\$	\$
<i>(list all additional on a separate sheet and attach)</i>			

## Additional Occupants

List everyone, including minor children, who will live with you:

Full Name

Relationship to Applicant

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## Rental History

Current Address: 

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Dates Lived at Address: 

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 Reason for Leaving: 

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Landlord/Manager: 

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 Landlord/Manager's Phone: 

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Rent: \$ 

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 Security Deposit: \$ 

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Previous Address: 

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Dates Lived at Address: 

---

 Reason for Leaving: 

---

Landlord/Manager: 

---

 Landlord/Manager's Phone: 

---

Rent: \$ 

---

 Security Deposit: \$ 

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Previous Address: 

---

Dates Lived at Address: 

---

 Reason for Leaving: 

---

Landlord/Manager: 

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 Landlord/Manager's Phone: 

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Rent: \$ 

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 Security Deposit: \$ 

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*First-time renters: Instead give a description of your housing situation for the past five years.*

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## Employment History

*Employees: Attach tax returns from the most recent two years or pay stubs for the past 6 months.*

*Self-employed applicants: Instead attach tax returns for the past two years.*

Name and Address of Current Employer: \_\_\_\_\_  
\_\_\_\_\_

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

Name of Supervisor: \_\_\_\_\_ Supervisor's Phone: \_\_\_\_\_

Dates Employed at This Job: \_\_\_\_\_ Position or Title: \_\_\_\_\_

Name and Address of Previous Employer: \_\_\_\_\_  
\_\_\_\_\_

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

Name of Supervisor: \_\_\_\_\_ Supervisor's Phone: \_\_\_\_\_

Dates Employed at This Job: \_\_\_\_\_ Position or Title: \_\_\_\_\_

## Pets

Do you have a Pet(s)? ☐ Yes ☐ No (if no, please skip to next section)

If yes, what is the animal? ☐ Cat ☐ Dog ☐ Other \_\_\_\_\_

Is the animal a "Service Animal"? ☐ Yes ☐ No

Under the Americans with Disabilities Act (ADA), the term "pet" excludes a service, guide, signal, or support animal used by Tenant because of blindness, or deafness, or because of a physical handicap. The ADA defines "service animal" as a dog that has been individually trained to do work or perform tasks for the benefit of an individual with a disability. The laws of this state make it illegal for a Landlord to refuse to rent property or to otherwise discriminate against any person on the basis of a service animal. Service animals and lease agreements are also guided by federal law under the Americans with Disabilities Act as well as under the Fair Housing Act.

Are the animal's vaccinations current? ☐ Yes ☐ No

Is this animal licensed according to local laws? ☐ Yes ☐ No

What is the weight of the animal? \_\_\_\_\_ lbs.

Is this animal spayed or neutered? ☐ Yes ☐ No

Has this pet ever bitten or injured another person? ☐ Yes ☐ No

## Miscellaneous

Describe any water-filled furniture you want to have in the rental property:

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Do you smoke? ☐ Yes ☐ No

Have you ever:

Filed for bankruptcy? ☐ Yes ☐ No How many times \_\_\_\_\_

Been sued? ☐ Yes ☐ No How many times \_\_\_\_\_

Sued someone else? ☐ Yes ☐ No How many times \_\_\_\_\_

Been evicted? ☐ Yes ☐ No How many times \_\_\_\_\_

Been convicted of a felony? ☐ Yes ☐ No How many times \_\_\_\_\_

Explain any "Yes" listed above (include dates): \_\_\_\_\_

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Are there any circumstances which may interrupt your income or ability to pay rent?

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Do you currently have, or will you have renter's insurance secured before you move in?

☐ Yes ☐ No

Name of Renter's Insurance Carrier: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Company or Agent Telephone Number: \_\_\_\_\_

If you have a co-signer, Will the Co-Signer complete the Co-Signer Agreement Form? ☐ Yes ☐ No



# CONSUMER CREDIT and BACKGROUND REPORT RELEASE FORM

## PLEASE READ CAREFULLY

BY MY SIGNATURE BELOW I AUTHORIZE

\_\_\_\_\_ (Landlord or Landlord's Agent)

to obtain a Consumer Credit Report and/or a Background Report on me. This authorization is valid for purposes of verifying information given pursuant to employment, leasing, rental, business negotiations, or any other lawful purpose covered under the Fair Credit Reporting Act. (FCRA)

The Background Check may contain information available in the Public Domain but may not include interviews with persons other than previous employers or their agents.

By my signature below, I hereby authorize all corporations, former employers, credit agencies, educational institutions, law enforcement agencies, city, state, county and federal courts and agencies, military services and persons to release all information they may have about me including criminal and driving history. This authorization shall be valid in original or copy form.

Applicant/Co-Signer Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Current Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Drivers License / ID Number: \_\_\_\_\_ State: \_\_\_\_\_

\_\_\_\_\_  
Applicant/Co-Signer Signature

\_\_\_\_\_  
Date

**\*\*NOTE: PLEASE INCLUDE A COPY OF A VALID DRIVERS LICENSE\*\***

From: Management  
To: All Tenants & Applicants

**RE: Inclusion Policy**

It is the policy of the owner and manager of this property to rent our units without regard to a person's race, color, religion, national origin, disability, sex, age, marital status, familial status, sexual orientation, gender identity, source of income, sexual harassment, victim of domestic violence, or any other arbitrary discrimination.

As part of our commitment to provide equal opportunity in housing, we comply with all federal, state, and local laws prohibiting discrimination. All tenants and applicants will be treated equally and subject to the same policies. If you have any questions or concerns regarding our inclusion policy, you may contact the Manager/Owner listed below.

The Lucas Organization LLC  
71 Commercial Street  
P.O. Box 292  
Boston, MA 02109  
(617) 777 - 2505  
Support@TheLucasOrganization.com

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Landlord/Manager

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Date

**Signatures:**

**I have read and understand the Landlord’s Pet Policy and the Landlord’s Inclusion Policy. (see attached)**

I certify under penalty of perjury that all the information given above is true and correct.

In consideration for being permitted to apply for this apartment, I represent all information on this application to be accurate and true and the owner/manager/rental agent may rely on this information when investigating this application. I understand that my lease or rental agreement may be terminated if I have made any materially false or incomplete statements in this application.

I authorize any person, employer, company, agency including state and federal agencies, credit bureaus, and references having information on me, to release any and all information on me to the owner/manager/rental agent or their credit checking agencies. This permission will survive the expiration of my tenancy. A photocopy of this release shall be equivalent to an original copy.

I hereby release, remise, and forever discharge from any action whatsoever, in law and in equity, all owners/managers/rental agents/employees/or agents of both landlord and their credit checking agencies in connection with the investigating, processing, or credit checking of this application and will hold them harmless from any agent or reprisal whatsoever.

Print Name: \_\_\_\_\_ X \_\_\_\_\_ Date \_\_\_\_\_

Print Name: \_\_\_\_\_ X \_\_\_\_\_ Date \_\_\_\_\_