

Squire Village Apartments

279 Amherst Road
Sunderland, MA 01375
Phone (413) 665-2203
E-mail: office@squirevillage.net

Date of application: _____ Desired date of occupancy: _____

Type and size of apartment wanted (No. of bedrooms): _____

PERSONAL INFORMATION

Applicant's full name: _____ Date of Birth: _____

Social security No.: _____ Driver's license No. /state: _____

Full names of all other residents:	Relationship to you:	Date of birth:

What is your current telephone? _____

What is your current E-mail address? _____

How did you hear about our property? _____

RESIDENCE HISTORY

Present address: _____

Dates from: _____ Dates to: _____

Present landlord: _____ Telephone: _____

Monthly payment\$: _____ Reason for moving: _____

Previous address: _____

Dates from: _____ Dates to: _____

Present landlord: _____ Telephone: _____

Monthly payment\$: _____ Reason for moving: _____

VEHICLE INFORMATION

Total number of vehicles: _____

Make/Model: _____ Year: _____ Color: _____ Plate number/state: _____

Make/Model: _____ Year: _____ Color: _____ Plate number/state: _____

Other car/motorcycle: _____

EMPLOYMENT INFORMATION

Present employer: _____ Dates from: _____ To: _____
Employer's address: _____ Telephone: _____
Position: _____ Supervisor: _____ Gross monthly salary \$: _____

Previous employer: _____ Dates from: _____ To: _____
Employer's address: _____ Telephone: _____
Position: _____ Supervisor: _____ Gross monthly salary \$: _____

Previous employer: _____ Dates from: _____ To: _____
Employer's address: _____ Telephone: _____
Position: _____ Supervisor: _____ Gross monthly salary \$: _____

BANKING AND CREDIT REFERENCES

Bank name and branch: _____ Telephone: _____
Checking account number: _____ Savings account number: _____

Credit reference: _____ Telephone: _____
Address: _____ Account number: _____

Credit reference: _____ Telephone: _____
Address: _____ Account number: _____

Credit reference: _____ Telephone: _____
Address: _____ Account number: _____

EMERGENCY CONTACT INFORMATION

Name: _____ Relationship: _____
Address: _____ Telephone: _____
E-mail: _____

Emergency contact must be someone you do NOT live with

Have you or your co-applicants ever:

Been sued for non-payment of rent? Yes _____ No _____ Broken a rent agreement or lease? Yes _____ No _____
Been evicted or asked to move out? Yes _____ No _____ Been sued for damage to rental property? Yes _____ No _____
Declared Bankruptcy? Yes _____ No _____

I hereby make application for an apartment and certify that this information is correct. I authorize you to contact any references that I have listed. I also authorize you to obtain my consumer credit report from your credit reporting agency, which will appear as an inquiry on my file.

APPLICANT'S SIGNATURE: _____

DATE SIGNED: _____