

RENTAL APPLICATION

Old Liverpool Point

706 Old Liverpool Rd. • Liverpool, NY 13088
 Phone (315) 457-2039 • Fax (315) 457-2075
www.oldliverpoolpoint.com
 oldliverpoolpoint@outlook.com

FOR OFFICE USE ONLY	
DATE OF VISIT _____	
UNIT(S) SHOWN	RENT

*Please complete all requested information.
 Missing information may delay the application process.*

Date of Application: _____	Desired Date of Occupancy: _____
Is that date flexible? _____	If yes, what is the date range? _____
Floor Desired (circle one): First Second Third 2 nd Choice: _____	

PERSONAL INFORMATION

Applicant's Full Name: _____ Date of Birth: ____/____/____
 SSN: ____-____-____ Driver's License No./State: _____

Please attach a copy of your driver's license to this application.

Email Address: _____
 Mobile Phone: (____)____-____ Texts? Yes / No Other Phone: (____)____-____

Full Name of Other Resident, if any	Relationship to You	Application Submitted?

- HAVE YOU EVER:** Been sued for non-payment of rent? Yes No
 Been evicted or asked to move out? Yes No Broken a Rental Lease? Yes No
 Been arrested? Yes No Been convicted of a felony or misdemeanor? Yes No
 Been convicted of a crime? Yes No Been convicted of a sexual offense? Yes No
 Been a party to any lawsuit? Yes No Had any judgements against you? Yes No
 Declared Bankruptcy? Yes No Been sent to collections? Yes No
DO YOU: Smoke (including e-cigarettes)? Yes No Have a pet? Yes No

If you answered "Yes" to any of the above questions, please provide an explanation here:

RESIDENCE HISTORY

Current Address: _____

Previous Address: _____

Time at this address: _____ Yrs _____ Mos

From: ____/____/____ To: ____/____/____

Rent or Own? _____

Rent/Mortgage per month: \$ _____

Reason for leaving: _____

Landlord's Name: _____

Landlord's Phone Number: _____

Landlord's Fax Number: _____

Landlord's Email: _____

Time at this address: _____ Yrs _____ Mos

From: ____/____/____ To: ____/____/____

Rent or Own? _____

Rent/Mortgage per month: \$ _____

Reason for leaving: _____

Landlord's Name: _____

Landlord's Phone Number: _____

Landlord's Fax Number: _____

Landlord's Email: _____

At the end of this application there is a Landlord Reference Form. Please complete the top section and return with this application. We will submit to your current Landlord. If you have lived in more than one apartment in the last five years, please complete a separate form for each Landlord.

EMPLOYMENT INFORMATION

Current Employer: _____

Previous Employer: _____

From: ____/____/____ To: ____/____/____

Position: _____

Annual Salary: \$ _____

Supervisor's Name: _____

Supervisor's Phone Number: _____

Supervisor's Fax Number: _____

From: ____/____/____ To: ____/____/____

Position: _____

Annual Salary: \$ _____

Supervisor's Name: _____

Supervisor's Phone Number: _____

Supervisor's Fax Number: _____

Please attach copies of two recent pay stubs or (other proof of income) to this application.

BANKING AND CREDIT REFERENCES

Bank Name: _____

Bank Name: _____

Credit Card (MC/Visa/Other please specify): _____

Credit Card (MC/Visa/Other please specify): _____

Loan Type (School/Auto/Other please specify): _____

Loan Type (School/Auto/Other please specify): _____

Checking? Savings? Loan?

Checking? Savings? Loan?

Current Balance: \$ _____

Current Balance: \$ _____

Monthly Payment: \$ _____

Monthly Payment: \$ _____

TERMS, DISCLOSURES AND SIGNATURE - PLEASE READ CAREFULLY

1. A non-refundable application fee of \$20 per applicant is due with the signed application(s). This fee covers background and credit checks. Applications will not be processed without the fees.
2. The Landlord's acceptance of this application does not obligate the Landlord to approve the application, nor does it guarantee the applicant tenancy at Old Liverpool Point.
3. The Landlord's approval of this application does not obligate the applicant to accept residency at Old Liverpool Point.
4. A security deposit equal to one month's rent is due on the day the lease is executed and should be in the form of a personal check, cashier's check or money order. The security deposit will be kept in a separate bank account for the duration of your lease. Upon termination, the cost of repairing any damages to the apartment not deemed "normal wear and tear" will be deducted from the security deposit. If costs exceed the amount of the security deposit, the Landlord has the right to bill the excess to the terminating Tenant. The balance of your security deposit, if any, will be returned to you within 14 days of the lease termination date.
5. Rent is due on the 1st of the month, in full. (First month's rent and the security deposit are separate charges.) Late fees (per the Lease Agreement) will be assessed if rent is not received on time. Checks must not be post-dated. Checks dated after the 1st of the month for which rent is due will be considered late and the appropriate fees will be charged. If the 1st of the month falls on a Saturday, Sunday, or Bank Holiday, rent is due the next business day. There is no grace period.
6. A \$20 fee will be charged for each check that is dishonored. After two checks have been dishonored, Landlord has the right to request all future rent payments to be in the form of cash, money order, or cashier's check.
7. Office hours are by appointment only. Currently, business is conducted via phone, text message, fax, email, and by appointment.
8. Holidays, as referred to in the Lease, include New Year's Day, Good Friday, Memorial Day, Independence Day, Labor Day, Thanksgiving, Christmas Eve, and Christmas. The Rental Office will be closed on these days. Any payments that fall due on one of these days are considered due on the next business day.
9. Old Liverpool Point has a strict "No Pet" policy. This includes, but is not limited to: cats, dogs, birds, fish, rabbits, guinea pigs, hamsters, lizards, etc. There is a steep fine for Pet Policy violations. If you are found to have a pet living in your apartment, it is grounds for eviction.
10. Old Liverpool Point is a non-smoking complex. Smoking (including e-cigarettes and marijuana) is not permitted (by tenants or visitors) on the property. There is a steep fine for violation of the Non-Smoking Policy. Violation of the Non-Smoking policy is grounds for eviction.
11. Possession, use, dealing and/or trafficking of illegal drugs is grounds for eviction.

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This Section to be Completed by Applicant

Tenant Name: _____ Rental Period: ___/___/___ - ___/___/___

Address: _____

I authorize the release of the information requested to Old Liverpool Point Apartments.

Signature

Date

LANDLORD REFERENCE

This person has applied for an apartment at our complex. We ask your cooperation in providing the following information and returning it to us. Your prompt return of this information will help assure timely processing of the application. Please fax the completed form to (315) 457-2075. The applicant has consented to this release of information as shown above.

- Please verify dates of tenancy: ___/___/___ - ___/___/___
- What was the rent for the unit the applicant lived in? \$ _____
- Was the applicant ever late with rent or other charges?
 Never Occasionally Frequently
- What was the general condition and cleanliness of the unit?
 Excellent Good Fair Poor
- Were there any complaints about conduct of the applicant or any of his/her guests? YES NO
If Yes, please explain: _____
- Did the applicant have any pets while renting from you? YES NO
- Is the applicant a smoker? YES NO NOT SURE
- Has the applicant violated any terms in his/her lease? YES NO
If Yes, please explain: _____
- Would you rent to this person again? YES NO
- Please make any additional comments here that you feel will help us determine whether to approve this person's application: _____

Printed Name of Person Completing this Form

Title

Signature

Date