

RENTAL APPLICATION

Georgian Court Apartments

4420 Georgian Court • Liverpool, NY 13090

Phone (315) 451-5840 • Fax (315) 457-2075

www.georgiancourtapartments.com

georgiancourt@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? _____

Apartment Desired (circle one): 1Bed/1Bath 2Bed/1Bath 2Bed/2Bath 2nd Choice: _____

Floor Desired (circle one): First Second Third 2nd 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 All Other Residents	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

Time at this address: _____ Yrs _____ Mos

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

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

Rent or Own? _____

Rent or Own? _____

Rent/Mortgage per month: \$ _____

Rent/Mortgage per month: \$ _____

Reason for leaving: _____

Reason for leaving: _____

Landlord's Name: _____

Landlord's Name: _____

Landlord's Phone Number: _____

Landlord's Phone Number: _____

Landlord's Fax Number: _____

Landlord's Fax Number: _____

Landlord's Email: _____

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: ____/____/____

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

Position: _____

Position: _____

Annual Salary: \$ _____

Annual Salary: \$ _____

Supervisor's Name: _____

Supervisor's Name: _____

Supervisor's Phone Number: _____

Supervisor's Phone Number: _____

Supervisor's Fax 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: _____

Checking? ☐ Savings? ☐ Loan? ☐

Bank Name: _____

Checking? ☐ Savings? ☐ Loan? ☐

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

Current Balance: \$ _____

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

Current Balance: \$ _____

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

Monthly Payment: \$ _____

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

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 Georgian Court.
3. The Landlord's approval of this application does not obligate the applicant to accept residency at Georgian Court.
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 30 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. Georgian Court 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. Georgian Court 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.

TERMS, DISCLOSURES AND SIGNATURE, CONTINUED

The Applicant understands that the Landlord will perform a credit check to verify the Applicant's credit references and credit history in connection with the processing of this Rental Application. The Landlord may also perform a criminal records check, and check all employer and landlord references. Personal references may also be contacted and driving records may be obtained. Official reports will be retained in the Rental Office. Additional information may be requested from Applicant if deemed necessary by Landlord.

IT IS AGAINST THE LAW TO DISCRIMINATE AGAINST PROSPECTIVE TENANTS ON THE BASIS OF RACE, RELIGION, NATIONAL ORIGIN, AGE, DISABILITY OR FAMILY STATUS. LOCAL OR STATE LAWS MAY INCLUDE ADDITIONAL CLASSES WHICH ARE PROTECTED FROM DISCRIMINATION IN HOUSING.

The information provided by the prospective tenant(s) may be used by the Landlord to determine whether to accept this Application. Upon written request within 60 days, the Landlord will disclose to the Applicant in writing the nature and scope of any investigation the Landlord has requested, and will, if the Application is refused, state in writing the reason for said refusal.

I represent that the information provided in this Application is true and correct to the best of my knowledge. The Landlord is authorized to verify the references and employment information given in this Application and to request a credit and criminal records check. I understand that driving records may also be obtained. I acknowledge receipt of a copy of this application (if requested).

Applicant's Signature

Print Name

Date

FOR OFFICE USE ONLY - DO NOT WRITE BELOW

Date Application Received: ____/____/____

REFERENCES	REMARKS
<input type="checkbox"/> Present Landlord	
<input type="checkbox"/> Previous Landlord	
<input type="checkbox"/> Employment	
<input type="checkbox"/> Previous Employer	
<input type="checkbox"/> Credit Score	
<input type="checkbox"/> Credit Card	
<input type="checkbox"/> Credit Card	
<input type="checkbox"/> Loan	
<input type="checkbox"/> Loan	
<input type="checkbox"/> Other	

RECORD OF PAYMENTS RECEIVED		
DATE	DESCRIPTION	AMOUNT

This Application: ☐ Approved ☐ Not Approved

Apartment No.: _____ Rent: \$ _____

Anticipated Move-In Date: ____/____/____

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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 Georgian Court 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