

MIDDAUGH REAL ESTATE, INC.
Multi-Listing Services
163 N. Main Street, Wellsville, NY 14895
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www.middaughrealestateinc.com

RENTAL APPLICATION

APPLICANT INFORMATION: (Please complete ALL areas)

(First Name) (Middle Name) (Last Name)

Current Living Address: _____

Mailing Address If Different From Above: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

E-mail Address: _____

Emergency Contact: _____ Relationship To You: _____

Address: _____ Phone: _____

Rental Needs: 1 Bedroom 2 Bedroom 3 Bedroom Other _____

1 Bathroom 2 Bathrooms

Handicap Accessible

Upper Apartment Lower Apartment Other _____

Amount Of Rent Willing To Pay: \$ _____ Requested Move In Date: _____

Do You Own A Pet(s): No Yes

If Yes, Please Specify How Many And What Kind Of Pet(s):

List Yourself and ALL Occupants Who Will Be Living With You:

Name: _____ Age: _____ Relationship To You: SELF Smoke: No Yes

What is your source of income: _____

Employer Name & Address: _____

Supervisor Name: _____ Phone: _____

Dates Employment: From _____ To _____ Job Title: _____

Name: _____ Age: _____ Relationship To You: _____ Smoke: No Yes

What is your source of income: _____

Employer Name & Address: _____

Supervisor Name: _____ Phone: _____

Dates Employment: From _____ To _____ Job Title: _____

Name: _____ Age: _____ Relationship To You: _____ Smoke: No Yes

What is your source of income: _____

Employer Name & Address: _____

Supervisor Name: _____ Phone: _____

Dates of Employment: From _____ To _____ Job Title: _____

Additional Occupants:

Name: _____ Age: _____ Relationship To You: _____ Smoke: No Yes
Name: _____ Age: _____ Relationship To You: _____ Smoke: No Yes

Have You or Anyone Who Will Be Living With You Been Convicted of A Crime? No Yes

If Yes, Please Specify: _____

How Many Registered Vehicles Do You Own? _____

Rental/Residence History:

Current Rental Address: _____
Dates Lived At This Address: From _____ To _____ Monthly Rent Payment: \$ _____
Reason For Leaving: _____
Landlord/Manager Name: _____ Phone: _____

Previous Rental Address: _____
Dates Lived At This Address: From _____ To _____ Monthly Rent Payment: \$ _____
Reason For Leaving: _____
Landlord/Manager Name: _____ Phone: _____

References:

Personal Reference Name: _____ Relationship: _____
Address: _____ Phone: _____

Personal Reference Name: _____ Relationship: _____
Address: _____ Phone: _____

Agreement & Authorization Signature:

I certify that all the information given on this application is true and correct and I understand that my rental agreement may be terminated if I have made any false or incomplete statements on this application. I hereby authorize verification of the information I have provided and communication with any and all names listed on this application. *All Occupants 18 years of age and older must provide references and sign below.*

Applicant Signature: _____ Date: _____

Applicant Signature: _____ Date: _____

Applicant Signature: _____ Date: _____

Applicant Signature: _____ Date: _____