



407R Mystic Ave. Building 34B, Medford, MA 02155 Phone: 617-996-9226 Fax: 1866-469-2131

RENTAL APPLICATION - GENERAL INFORMATION

Date:

NAME OF APPLICANT	PRIMARY PHONE NO	SOCIAL SECURITY NO.
INITIAL IF OVER 18 YEARS OF AGE ____	EMAIL ADDRESS	
PRESENT ADDRESS	DATES OF CURRENT OCCUPANCY	
CURRENT LANDLORD'S NAME	PHONE NO.	
FORMER LANDLORD'S NAME	PROPERTY ADDRESS (Where you lived)	PHONE NO.
EMPLOYER	COMPLETE ADDRESS	OFFICE PHONE NO. SUPERVISOR'S Name & NO.
POSITION	YEARS WITH COMPANY	TYPE OF BUSINESS: SALARY:
PERSONAL REFERENCE:	COMPLETE ADDRESS	PHONE NO.
IN CASE OF EMERGENCY NOTIFY:	COMPLETE ADDRESS	PHONE NO.

ARE YOU A CONVICTED FELON?(Y/N) ____ If "Yes", Please submit detail of conviction(s)

NAME OF ALL CO-TENANTS (Each Adult Must File A Separate Application)

APARTMENT ADDRESS:	RENT BEGINS:	Base rent per month \$ _____
OCCUPANCY DATE:		Parking \$ _____
TOTAL NO. OF OCCUPANTS:		Keylock \$ _____
NO. OF ADULTS:		Last Month's Rent \$ _____
NO/TYPE OF PETS:		Security Deposit \$ _____
TERM OF LEASE (MONTHS) FROM(DATE) TO(DATE)		Deposit on Account \$ _____
		Balance Due Upon Acceptance \$ _____

Base rent and other monthly charges are due and payable on the first day of each month in advance.

Pursuant to Massachusetts law, the Management shall not make any inquiry concerning race, religious creed, color, national origin, sex, sexual orientation, age, (except if a minor), ancestry or marital status of the Application or concerning the fact that the Applicant is a veteran or a member of the armed forces or is handicapped. The Applicant authorizes the Management and/or Renting Agency to obtain or cause to be prepared a consumer credit report relating to the Applicant. Neither the Owner nor the Management is responsible for the loss of personal belongings caused by fire, theft, smoke, water or otherwise, unless caused by their negligence.

The undersigned warrants and represents that all statements herein are true and agrees to execute upon representation a lease or a Tenancy at Will agreement in the usual form, a copy of which the Applicant has received or has had occasion to examine, which lease or agreement may be terminated by the Lessor if any statement herein made is not true. Deposit is to be applied as shown above or applied to actual damages sustained by the owner, except it is to be refunded if said application is not accepted by the owner.

Kimura realty reserves the right to keep undersigned's deposit if client were to back out of renting the aforementioned property for any reason. In other words, the deposit is non-refundable and will be forfeited if tenant changes his/her mind.

This application must be acted upon by the owner on or before _____

The renting agent is an independent contractor and has no authority to make any representation concerning the premises; the Renting Agent is only authorized to show the apartment for rent and to assist in the screening of rental applicants.

Rental Agent Signature _____ Applicant Signature _____

