## **APPLICATION FOR RENTAL**

## Quality Apartments ITC Realty Corp.

## NOTICE: All applicants 18+ years of age must complete and submit individual applications.

APARTMENT	Rent	START DATE	AGENT/REFERRED BY				
APPLICANT INFORMATIC	ON—APPLICANTS MUST	PROVIDE GOVERNMENT-ISSUED	рното ID				
LAST NAME	FIRST NAME	M.I.	SSN	DRIVER'S LICENSE #			
BIRTH DATE	Home Phone ( ) -	ALTERNATE PHONE ( ) -	EMAIL				
CURRENT ADDRESS							
Street Address		Сітү	STATE	ZIP CODE			
DATE IN	DATE OUT	LANDLORD NAME		LANDLORD PHONE			
Monthly Rent \$	REASON(S) FOR LEAV	REASON(S) FOR LEAVING					
PREVIOUS ADDRESS							
STREET ADDRESS		Сіту	STATE	ZIP CODE			
DATE IN	DATE OUT	LANDLORD NAME	LANDLORD NAME				
Monthly Rent \$	REASON(S) FOR LEAV	REASON(S) FOR LEAVING					
OTHER OCCUPANTS							
LIST NAMES AND BIRTH D	ATES OF ALL ADDITIONAL	Adult (18+) Occupants					
LIST NAMES AND BIRTH D.	ATES OF ALL MINOR (<18)	OCCUPANTS					
LIST NAMES AND BIRTH DA	ATES OF ALL MINOR (<18)	OCCUPANTS					
		OCCUPANTS /EIGHT, APPEARANCE)					
PETS NUMBER OF PETS	DESCRIBE (BREED, W		ONTH'S WORTH OF PAY STU	JBS FOR INCOME VERIFICATION			
PETS NUMBER OF PETS	DESCRIBE (BREED, W	eight, Appearance)	ONTH'S WORTH OF PAY STU	MONTHLY NET PAY			
PETS NUMBER OF PETS EMPLOYMENT & INCOM	DESCRIBE (BREED, W	leight, Appearance)	ONTH'S WORTH OF PAY STU START DATE				
PETS NUMBER OF PETS EMPLOYMENT & INCOM 1. OCCUPATION	DESCRIBE (BREED, W	/eight, Appearance) LICANTS MUST PROVIDE ONE MC Employer/Company		MONTHLY NET PAY \$			
PETS NUMBER OF PETS EMPLOYMENT & INCOM 1. OCCUPATION SUPERVISOR NAME	DESCRIBE (BREED, W	VEIGHT, APPEARANCE) <u>LICANTS MUST PROVIDE ONE MO</u> EMPLOYER/COMPANY SUPERVISOR PHONE ( ) -		MONTHLY NET PAY \$ END DATE MONTHLY NET PAY			
PETS NUMBER OF PETS EMPLOYMENT & INCOM 1. OCCUPATION SUPERVISOR NAME 2. OCCUPATION	DESCRIBE (BREED, W	/EIGHT, APPEARANCE) LICANTS MUST PROVIDE ONE MC EMPLOYER/COMPANY SUPERVISOR PHONE () - EMPLOYER/COMPANY	START DATE	MONTHLY NET PAY \$ END DATE MONTHLY NET PAY \$			
PETS         NUMBER OF PETS         EMPLOYMENT & INCOM         1. OCCUPATION         SUPERVISOR NAME         2. OCCUPATION         SUPERVISOR NAME	DESCRIBE (BREED, W	/EIGHT, APPEARANCE) LICANTS MUST PROVIDE ONE MC EMPLOYER/COMPANY SUPERVISOR PHONE () - EMPLOYER/COMPANY	START DATE	MONTHLY NET PAY \$ END DATE MONTHLY NET PAY \$ END DATE MONTHLY INCOME \$ MONTHLY INCOME			
PETS         NUMBER OF PETS         EMPLOYMENT & INCOM         1. OCCUPATION         SUPERVISOR NAME         2. OCCUPATION         SUPERVISOR NAME         1. OTHER INCOME DESCRIPTION	DESCRIBE (BREED, W	/EIGHT, APPEARANCE) LICANTS MUST PROVIDE ONE MC EMPLOYER/COMPANY SUPERVISOR PHONE () - EMPLOYER/COMPANY	START DATE	MONTHLY NET PAY \$ END DATE MONTHLY NET PAY \$ END DATE MONTHLY INCOME \$			
PETS         NUMBER OF PETS         EMPLOYMENT & INCOM         1. OCCUPATION         SUPERVISOR NAME         2. OCCUPATION         SUPERVISOR NAME         1. OTHER INCOME DESCRIPTION         2. OTHER INCOME DESCRIPTION	DESCRIBE (BREED, W	/EIGHT, APPEARANCE) LICANTS MUST PROVIDE ONE MC EMPLOYER/COMPANY SUPERVISOR PHONE () - EMPLOYER/COMPANY	START DATE	MONTHLY NET PAY \$ END DATE MONTHLY NET PAY \$ END DATE MONTHLY INCOME \$ MONTHLY INCOME			
PETS         NUMBER OF PETS         EMPLOYMENT & INCOM         1. OCCUPATION         SUPERVISOR NAME         2. OCCUPATION         SUPERVISOR NAME         1. OTHER INCOME DESCRIPTION         2. OTHER INCOME DESCRIPTION         EMERGENCY CONTACT	DESCRIBE (BREED, W ME INFORMATION—App	/EIGHT, APPEARANCE) LICANTS MUST PROVIDE ONE MC EMPLOYER/COMPANY SUPERVISOR PHONE () - EMPLOYER/COMPANY	START DATE START DATE	MONTHLY NET PAY \$ END DATE MONTHLY NET PAY \$ END DATE MONTHLY INCOME \$ MONTHLY INCOME \$			
PETS         NUMBER OF PETS         EMPLOYMENT & INCOM         1. OCCUPATION         SUPERVISOR NAME         2. OCCUPATION         SUPERVISOR NAME         1. OTHER INCOME DESCRIPTION         2. OTHER INCOME DESCRIPTION         1. OTHER INCOME DESCRIPTION         1. OTHER INCOME DESCRIPTION         2. OTHER INCOME DESCRIPTION	DESCRIBE (BREED, W ME INFORMATION — APP INFORMATION — APP	/EIGHT, APPEARANCE) LICANTS MUST PROVIDE ONE MC EMPLOYER/COMPANY SUPERVISOR PHONE () - EMPLOYER/COMPANY	START DATE START DATE PHONE ( ) - PHONE ( ) -	MONTHLY NET PAY \$ END DATE MONTHLY NET PAY \$ END DATE MONTHLY INCOME \$ MONTHLY INCOME \$ RELATIONSHIP			
PETS         NUMBER OF PETS         EMPLOYMENT & INCOM         1. OCCUPATION         SUPERVISOR NAME         2. OCCUPATION         SUPERVISOR NAME         1. OTHER INCOME DESCRIME         2. OTHER INCOME DESCRIME         1. NAME         2. NAME	DESCRIBE (BREED, W ME INFORMATION — APP INFORMATION — APP	/EIGHT, APPEARANCE) LICANTS MUST PROVIDE ONE MC EMPLOYER/COMPANY SUPERVISOR PHONE () - EMPLOYER/COMPANY	START DATE START DATE PHONE ( ) - PHONE ( ) -	MONTHLY NET PAY \$ END DATE MONTHLY NET PAY \$ END DATE MONTHLY INCOME \$ MONTHLY INCOME \$ RELATIONSHIP			

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www.worcesterqualityapartments.com

508-756-9220

BACKGROUND INFORMATION							
	Filed for bankruptcy?		Willfully or intentionally refu	used to pay rent when due?			
HAVE YOU EVER:	Been evicted from a tenancy or left owing money? If yes, please provide Property Name, City State, and Landlord Name						
HAVE TOO EVER.	□ YES □ NO						
	Been convicted of a crime? If yes, please provide Type of Offense, County, and State						
VEHICLE INFORMATION							
1. MAKE & MODEL			YEAR	LICENSE NO. & STATE			
OTHER VEHICLES				1			
<b>O</b> THER INFORMAT	ION						
HOW DID YOU HEAR	ABOUT THIS PROPERTY?						
PLEASE INCLUDE ANY	OTHER INFORMATION YOU BELIEVE WOULD HELI	Ρ ΤΟ Εναιιίατε της αρριά	CATION:				
I/We, the undersigned, authorize Fidelis Screening Solutions, LLC, Landlord, and its agents to obtain an investigative consumer credit							
	ut not limited to credit history, OFAC sea ender search. I authorize the release of ir						
-	his investigation is for resident screening			lipioyers, and ballk			
	ins information compiled from sources b		-	cannot be guaranteed. I			
-	s Screening Solutions, LLC, Landlord and	its agents free and ha	rmless of any liability for ar	ny damages arising out of			
any improper use of this information.							
<ul> <li>Important information about your rights under the Fair Credit Reporting Act:</li> <li>You have a right to request disclosure of the nature and scope of the investigation.</li> </ul>							
	t be told if information in your file has be						
<ul> <li>You have a right to know what is in your file, and this disclosure may be free.</li> </ul>							
• You have the right to ask for a credit score (there may be a fee for this service).							
You have the right to dispute incomplete or inaccurate information. Consumer reporting agencies must correct inaccurate,							
incomplete, or unverifiable information. These reports are being processed by Fidelis Screening Solutions, LLC, 4534 Clinton St Ste 2, West Seneca, NY 14224.							
A summary of your rights under the Fair Credit Reporting Act is available by visiting (Para información en español, visite o escribe):							
www.consumerfinance.gov/learnmore or by writing Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC							
20552							
Applicant agrees to pay for background check and credit score reports within 24 hours if contacted by ITC Realty to proceed with							
Applicant agrees to pay for background check and creat score reports within 24 hours in contacted by the realty to proceed with							
application process. Pricing as of [		] for <i>SmartMove</i> full report is [ <u>\$</u> ].					
Applicant Signat		DATE					
APPLICANT SIGNA	UNE	DAIL					
	I		l				

