

Office Use Only
 FD _____
 FICO _____
 COURT RECORD _____
 LISTING SHEET _____
 SITE STATUS _____

RENTNOHO.COM
 19A Hawley St, Northampton, MA 01060
 Phone (413) 582-0300 Fax (413) 582-0248

Drop off Location: 19A Hawley St, Northampton. Use secure drop slot or call for office hours.

ONE APPLICATION PER OCCUPANT OVER 18 - PLEASE COMPLETE IN ENTIRETY TO AVOID DELAYS

***If overnighting application, please waive any signature requirements**

***If emailing application, please leave Social Security # and Date of Birth fields blank and call office**

***Providing email addresses for references will help to expedite the application process**

ADDRESS APPLYING FOR:				
LISTING #	SHOWING AGENT:			
MONTHLY RENT \$				FEE RECEIVED?
REASON FOR MOVING?	PREFERRED LEASE START DATE:		LEASE TERM?	
CURRENT LEASE END DATE:	HAVE YOU GIVEN NOTICE TO LANDLORD?			
ANIMALS?	HOW MANY?	BREED/SEX	DO YOU SMOKE?	
PLEASE HAVE CURRENT VACCINATION RECORDS FAXED OR EMAILED				
FIRST NAME:	MIDDLE INITIAL:	LAST:		
SOCIAL SECURITY #	DATE OF BIRTH:			
IS YOUR CREDIT REPORT CURRENTLY FROZEN?				
EMAIL:	CELL PHONE:			
CURRENT ADDRESS WITH APARTMENT #:				
CITY:	STATE:		ZIP CODE:	
DATES OF TENANCY	FROM:	TO:	MONTHLY RENT:	UTILITY COST:
CURRENT LANDLORD NAME:				
LANDLORD ADDRESS:				
EMAIL:				
PHONE:	FAX:			

PREVIOUS ADDRESS WITH APARTMENT #:				
CITY:	STATE:		ZIP CODE:	
DATES OF TENANCY	FROM:	TO:	MONTHLY RENT:	UTILITY COST:
LANDLORD NAME:				
LANDLORD ADDRESS:				
EMAIL:				
PHONE	FAX:			

SECOND PREVIOUS ADDRESS WITH APARTMENT #:				
CITY:	STATE:		ZIP CODE:	
DATES OF TENANCY	FROM:	TO:	MONTHLY RENT:	UTILITY COST:
LANDLORD NAME:			LANDLORD ADDRESS:	
EMAIL:				
PHONE	FAX:			

CURRENT PLACE OF EMPLOYMENT:	POSITION:			
ADDRESS:				
SUPERVISOR:				
PHONE:	FAX:			
EMAIL:				
LENGTH OF EMPLOYMENT	FROM:	TO:	GROSS MONTHLY SALARY:	

ADDITIONAL SOURCES OF INCOME:				
Please provide documentation of all income such as but not limited to: Paystubs, bank statements, tax returns (if self employed)				
PREVIOUS EMPLOYER	DATES:		INCOME:	
STUDENT STATUS:	N/A	UNDERGRADUATE	GRADUATE	GRADUATION YEAR
PLEASE FILL OUT REVERSE SIDE				

HAVE YOU EVER BEEN EVICTED?	YES	NO
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HAVE YOU EVER BEEN CONVICTED OF THE FOLLOWING CRIMES:		
RAPE	YES	NO
CHILD SEXUAL ASSAULT	YES	NO
VIOLENT CRIME CONVICTION	YES	NO
ANY OTHER FELONY CRIME	YES	NO

LIST ALL OTHER OCCUPANTS WHO WILL BE RESIDING IN UNIT:

NAME:	RELATIONSHIP:	DATE OF BIRTH:
NAME:	RELATIONSHIP:	DATE OF BIRTH:
NAME:	RELATIONSHIP:	DATE OF BIRTH:

IN CASE OF EMERGENCY NOTIFY:

NAME:	RELATIONSHIP:	
ADDRESS:	PHONE	
CITY:	STATE:	ZIP:

VEHICLE INFORMATION:

MAKE:	MODEL:	YEAR:	PLATE#:	STATE:
MAKE:	MODEL:	YEAR:	PLATE#:	STATE:

I understand that all application fees are not refundable. The 60% Agency Commission shall be refunded in this application is not accepted by the owner, Lessor or Agent. Once accepted first months rent may be due as a deposit. All rents are due payable on the first day of each month in advance. I hereby waive all rights to return of the Agency Commission and will forfeit same as liquidated damages in the event I decide not to enter into the leasing agreement applied herein.

Pursuant to the Fair Housing Law, the lessor or lessor agent shall not refuse to rent a unit to any person because of race, creed, color, religion, national origin, handicap, or familial status not discriminate in the terms offered or services rendered.

RELEASE: In consideration for being permitted to apply for this apartment, I, the applicant do represent all information on this application to be true and accurate and that owner/agent may rely on this information when investigating and accepting this application. I hereby authorize the owner/agent to make independent investigations to determine my credit, financial, criminal check and character standing. I authorize any person, or credit checking agency having any information on me to release any and all such information to the owner or their agent or credit checking agencies. I hereby release, remise and forever discharge from and action whatsoever, in law and equity, all owners, managers, employees and/or agents, both of Landlord and their credit checking agencies in connection with processing, investigating, or credit checking this application, and will hold them harmless from and suit or reprisal whatsoever. I declare that a photocopy of my signature shall be as valid as the original.

Signature of Applicant: _____ Date: _____

Note: Must submit SEPARATE checks with completed application:

1. \$35 Application fee-Non Refundable
 2. Sixty Percent of Month's Rent Agency Commission-Refunded if Application is Not Accepted
- Checks made payable to RentNoho.com*