

**Sring Sun Property Management and Club One**  
**118 Julian Place, PMB 307**  
**Syracuse, NY 13210**  
**Tel: 315-446-5809**

**Rental Application**

Address: \_\_\_\_\_ Apt No. \_\_\_\_\_ Date of Application: \_\_\_\_\_

Name of Tenant: \_\_\_\_\_  
 Social Security No. \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Phone No. \_\_\_\_\_ Cell #: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Drivers License No. \_\_\_\_\_ State: \_\_\_\_\_  
 Spouse Name: \_\_\_\_\_ Children: # \_\_\_\_\_  
 Name \_\_\_\_\_ age \_\_\_\_\_  
 Name \_\_\_\_\_ age \_\_\_\_\_  
 Pets \_\_\_\_\_

**Place of Employment:** \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Supervisor: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Work Hours: \_\_\_\_\_  
 Salary: \_\_\_\_\_ gross/net How long at job: \_\_\_\_\_  
 \*\*\*\*\*

**Co-Tenant Information**  
 Name of Tenant #2 \_\_\_\_\_  
 Relationship to Tenant: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_  
 SSN# of Tenant #2 \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Drivers License Number: \_\_\_\_\_ State: \_\_\_\_\_

**Other sources of income:**  
 \_\_\_\_\_ SSI \_\_\_\_\_ Disability \_\_\_\_\_ Social Security  
 \_\_\_\_\_ Other

**Conditions & Information**  
**All pages of this lease application must be signed by all persons who will sign the lease. Additional tenant information is on page 2.**

**The completing of this application by Tenant and the acceptance of this application by Landlord creates no obligation of Landlord to approve the application.**

**This application will be approved or rejected usually with five (5) days of being submitted to landlord. However, there is no obligation of Landlord to notify tenant unless the application is approved.**

**If this application is approved, Tenant must make the security deposit and sign the lease before the tenancy begins.**

**Landlord complies with all Federal and State laws regarding discrimination and does not discriminate based upon age, sex, race, marital status, religion, national origin , or other prohibited classifications**

For Landlords Use Only
Rent Amount:
Deposit:
Annual lease to begin:
:
Number of Occupants
Apt #:
Move-In-Date
Names on Lease
Pending:
Not approved:
Approved:

By your signature, you agree that the information disclosed on this application is true, complete and accurate. You agree that the information disclosed shall be used by the landlord with respect to granting or denying your application to enter into a lease.

Sign \_\_\_\_\_ Date \_\_\_\_\_  
 Sign \_\_\_\_\_ Date \_\_\_\_\_  
 Please print name: \_\_\_\_\_

**Driver License  
 Proof of Income  
 Application fee \$25.00 per adult  
 2827 E Genesee Street  
 Syracuse NY 13224**

Have you ever broken a lease or been evicted from any type of housing? \_\_\_\_\_ - if yes, please explain (you may use the back of this form if necessary) Min.  
Occupancy expected \_\_\_\_\_

Have you ever been convicted of a felony? – if yes, please explain (use the back of this form if necessary)

Name all people who will reside in apartment:

Name	Relationship	Age if under 18

Present Address: \_\_\_\_\_, city \_\_\_\_\_, state \_\_\_\_\_, zip \_\_\_\_\_

How long? \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Name of owner/landlord: \_\_\_\_\_ Phone \_\_\_\_\_

Previous Address: \_\_\_\_\_, city \_\_\_\_\_ state \_\_\_\_\_ zip \_\_\_\_\_

How long \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Name or Owner / Landlord \_\_\_\_\_ Phone \_\_\_\_\_

**Motor Vehicle Information:**

Year	Make/Model	Color	Tag Number
_____	_____	_____	_____
_____	_____	_____	_____

**Credit References:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name \_\_\_\_\_ Phone: \_\_\_\_\_

Person to notify in case of emergency: \_\_\_\_\_ Phone: \_\_\_\_\_

**Personal References:**

<u>Name &amp; Address</u>	<u>Phone No</u>	<u>Relationship to tenant</u>
_____	_____	_____
_____	_____	_____

**ALL applicants must attach copy of their driver's license and social security card.**

**Acknowledgement:**

I understand there is a fee of \$25.00 per adult to process this rental application. I understand this is a non-refundable deposit and will not be applied to any future rent or security deposit. I shall, within three (3) days after receipt of notice that this application has been processed and accepted, deposit a sum in the amount of \$ \_\_\_\_\_ to be held by you as security and execute all required documents and lease.

I agree to take possession of the Apartment on this date: \_\_\_\_\_.

I understand that I forfeit my deposit if I do not take possession of the apartment on the above possession date.

I fully understand that Spring Sun Property Management – Club One has no obligation to hold the apartment after the above possession date.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Consent to Credit Check**

I/We authorize that the landlord or the agent of the landlord, the right to process the application for the purpose of obtaining a rental lease or agreement. I hereby authorize landlord to order and review any credit and/or criminal history report for the purpose of obtaining a rental lease. The applicant(s) affirm(s) that all of the information in this credit application is true and complete, whether completed by the applicant(s) or by the Landlord direct of the applicant(s). The undersigned makes the foregoing representations knowing that if any of such proves false, Landlord at his option may cancel and annul any lease given in reliance upon such information. credit and criminal history and investigate the accuracy of the information contained in the application. I/We further authorize all banks, employers, creditors, and references, and any and all other persons to provide to Landlord any and all information concerning my/our credit.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_