

Paulsen Rental Properties, LLC



Professional Property Management in the Greater Glens Falls Area 447 Glen Street, Glens Falls, NY 12801
www.PaulsenProperties.com 518-832-1818

Rental Application for: **Address:** _____ **Agent:** _____

- Each adult (18 years of age or older) who will be residing in the apartment must fill out this application.
- There is a **non-refundable cash** fee of **\$25.00** per applicant.

Basic Information

Full Legal Name: _____ Date of Birth: _____

Social Security Number: _____ Driver's License #: _____

Cell Phone: (_____) _____ - _____ Home Phone: (_____) _____ - _____

Email address: _____

Proposed Occupants:

Name: _____ DOB: _____ Relationship: _____

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Rental/Residence History – please list last five years history

Current Address: _____ Town: _____ State: _____ Zip Code: _____

Rent Amount: _____ Owner/Manager's Name: _____ Phone Number: _____

Dates of Residency: _____ to _____ Were you asked to move? _____

Reason for Leaving: _____

Do You Owe Any Rent: Yes or No Did You Give Your Landlord Notice to Leave: Yes or No

Previous Address: _____ Town: _____ State: _____ Zip Code: _____

Rent Amount: _____ Owner/Manager's Name: _____ Phone Number: _____

Dates of Residency: _____ to _____ Were you asked to move? _____

Reason for Leaving: _____

Do You Owe Any Rent: Yes or No Did You Give Your Landlord Notice to Leave: Yes or No

Prior Address: _____ Town: _____ State: _____ Zip Code: _____

Rent Amount: _____ Owner/Manager's Name: _____ Phone Number: _____

Dates of Residency: _____ to _____ Were you asked to move? _____

Reason for Leaving: _____

Do You Owe Any Rent: Yes or No

Did You Give Your Landlord Notice to Leave: Yes or No

Employment History - *Please provide copies of your latest pay stubs*

(If you have been employed with your current employer for less than 12 months you **must** provide your previous employer)

Current Employer: _____ Pay Rate/Salary: _____

Employer's Business Name & Address: _____

Supervisor/Manager's Name: _____ Phone Number: _____

Dates of Employment: _____ to _____

Previous Employer: _____ Pay Rate/Salary: _____

Employer's Business Name & Address: _____

Supervisor/Manager's Name: _____ Phone Number: _____

Reason for Leaving: _____

Dates of Employment: _____ to _____

Credit History

Have you ever been served a late rent notice: Yes or No; If yes, explain why? _____

Have you ever been served an eviction notice? If so, when? _____

Have you ever filed for bankruptcy? If so, when? _____

Do You Have a Checking Account? Yes or No If Yes, Name of Institution: _____

Do You Have a Savings Account? Yes or No If Yes, Name of Institution: _____

Do You Have any Credit Cards? Yes or No If Yes, Total Balance Owed: _____

Do You Have a Loan? Yes or No If Yes, Total Balance Owed: _____ Monthly payment: _____

Vehicles (Include All Vehicles)

Year/Make/Model/Color: _____ License Plate Number: State & #: _____

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References & Emergency Contacts

List at least two non-relative references:

Name: _____ Address _____

Phone: _____ Email: _____

Name: _____ Address _____

Phone: _____ Email: _____

Nearest Relative Living Elsewhere: Name: _____ Phone Number: _____

By signing the application you grant us permission to communicate with all contacts listed in this section in the event we can't locate you. Furthermore, if you abandon the apartment for any reason then you grant us permission to allow your relative listed above to remove all contents of the dwelling on your behalf.

General Information

1) Do you smoke: Yes or No

2) How long would you be looking to rent for? _____

3) When would you be able to move in? _____

4) Do you have any pets? Yes or No List type, breed, weight & age: _____

5) Have you been convicted of a felony? Yes or No If Yes, What? _____

6) Have you had any reoccurring problems with your current landlord? Yes or No? If Yes, please explain:

7) Why are you moving from your current address? _____

8) List any verifiable sources and amounts of income you wish to have considered (please provide a contact name & number so that we can verify this and / or copies of bank statements etc.): _____

9) If you were to run into financial difficulty in the future and couldn't come up with the money to pay the rent, do you know someone that would loan you the money? If so, provide the person's name, address, and phone number so that we can use them as a reference for you.

10) Have you been party to a lawsuit in the past? Yes or No? If yes, please explain: _____

11) Is there anything negative that we will find on your credit check or on a criminal background check? Yes or No?

If yes, please explain: _____

12) How did you hear about this rental property? _____

Agreement & Authorization Signature

I _____, believe that the statements I have made are true and correct. I hereby authorize a credit and/or criminal check to be made, verification of information I provided and communication with any and all names listed on this application by **Paulsen Rental Properties, LLC**. I understand that any discrepancy or lack of information may result in the rejection of this application. I understand that this is an application for an apartment or house and does not constitute a rental or lease agreement in whole or part. I further understand that there is a **non-refundable** fee to cover the cost of processing my application and I am not entitled to a refund even if I don't get the rental unit. Any question regarding rejected applications must be submitted in writing and accompanied by a self-addressed stamped envelope.

Signature: _____ Date: _____

Print Your Name: _____

**Please place application(s) along with the required fees and copies of pay stubs in an envelope and put in the black mailbox on the front porch labeled Paulsen Rental Properties at: 447 Glen Street, Glens Falls NY 12801
If mailed, send to: P.O. Box 175 Glens Falls, NY 12801**