

SOUTH CONCORD MEADOWS
c/o MESITI REAL ESTATE, INC.
99 CLINTON STREET
CONCORD, NH 03301

RENTAL APPLICATION

How did you hear about us? Please circle all that apply:

FRIEND INTERNET DRIVING BY NEWSPAPER CURRENT RESIDENT

A non-refundable \$45.00 fee is required at the time of the application to cover the processing cost. Please make all checks payable to Mesiti Real Estate, Inc. This application shall expire one (1) year from the original application date.

LEAVE THIS SECTION BLANK

The undersigned hereby makes an application to rent Unit # _____ located at South Concord Meadows in Concord, NH beginning on _____ at a monthly rent of \$ _____.

PLEASE TELL US ABOUT YOURSELF

Full Name: _____ Telephone: _____

Date of Birth: _____ Soc. Sec. #: _____

Co-Applicant's Name: _____ Telephone: _____

Date of Birth: _____ Soc. Sec. #: _____

List all Other Occupants Who Will Reside in Unit: _____

Pets: How Many? ____ Type of Pet: _____ If Dog, List Breed: _____

GIVE US YOUR RESIDENCE HISTORY FOR THE PAST YEAR

Primary Applicant – Current Address: _____

Month / Year Moved In: _____ Reason For Leaving: _____

Landlord/Owner/Address/Phone/Fax: _____

Co-Applicant – Current Address: _____

Month / Year Moved In: _____ Reason For Leaving: _____

Landlord/Owner/Address/Phone/Fax: _____

GIVE US YOUR EMPLOYMENT INFORMATION

Primary Applicant – Employment Status: FT____ PT____ Student____ Retired____ Unemployed____

Current Employer: _____ Telephone: _____

Address: _____

Salary: _____ Per: _____ Length of Employment: _____ Yrs. _____ Mos.

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PLEASE FILL OUT REVERSE SIDE

OTHER INFORMATION

In case of personal emergency, notify: _____ Phone: _____

Address: _____ Relationship: _____

You will be required to provide copies of the following: Driver's License, Vehicle Registration(s), most recent paystub showing Gross Year-to-Date wages, or your last three (3) paystubs. If you do not provide copies of these items, your application cannot be processed.

If management has any questions about the application, please give PHONE NUMBERS where you can be reached.

Applicant: Day Phone(s): _____ Night Phone(s): _____

Co-Applicant: Day Phone(s): _____ Night Phone(s): _____

I hereby apply to lease the above described premises for the term and conditions set forth.

Upon notification of approval of this application, the assignment of a unit, and the assignment of a lease commencement date, applicant shall have 24 hours to accept a tenancy. Acceptance shall be by the delivery of a Security Deposit in the amount of one month's rent. The applicant will be required to execute a written lease for 12 months prior to moving into the unit. In the event that the applicant cancels the tenancy prior to executing the written lease, applicant shall remain liable for one full first month's rent and agrees that the Landlord may apply the Security Deposit to pay such rent.

I ACKNOWLEDGE THAT AS PART OF YOUR PROCEDURE FOR PROCESSING MY APPLICATION, A CREDIT REPORT WILL BE OBTAINED TO VERIFY THE INFORMATION GIVEN ON THE APPLICATION AND I AUTHORIZE YOU TO CONTACT ANY REFERENCES THAT I HAVE LISTED.

Signature of Applicant: _____ Date: _____

Signature of Co-Applicant: _____ Date: _____

APPLICANT: PLEASE DO NOT WRITE BELOW

Application fee of \$ _____ Check #: _____ Date: _____

This application fee received by (name): _____ Date: _____

This Application Approved: _____ Denied: _____ By: _____

Denial Based on: Credit _____ References _____ Credit & References _____

Applicant Notified By: _____ Date: _____