

PEABODY PROPERTIES, INC.

536 Granite Street, Braintree, MA 02184
Tel: 781.794.1000 or 877.PPI.HOME | Fax: 781.794.1001
PeabodyProperties.com

MANAGEMENT USE ONLY
Date/Time Application Received:
Lottery Number:

RENTAL APPLICATION

SITE								
APPLYING FOR: Studio [□ 1BR □	2BR □ 3BI	R □ Othe	er□ Spe	cify BR Size:			
NAME 1:								
FIRST MI			LAST		SOCIAL	L SECURITY NUMBER		
NAME 2:								
FIRST MI			LAST		SOCIAL SECURITY NUMBER			
ADDRESS:								
	STREET		APT#		OWN OR CITY	STATE	ZIP CODE	
ADDRESS:					014/11 00 0177/	07475	710.0005	
DECIDED OF	STREET		APT#		OWN OR CITY	STATE	ZIP CODE	
	NCE:							
(1) HOME TEL.: MOBILE:								
(2) HOME TEL.: MOBILE:				OTHER	l:	_ EMAIL:		
Reason for applying at this	development?							
How did you hear about th	is development	?						
PRESENT LANDLOF	RD							
			TEL.#:			FAX #:		
ADDRESS:								
STRE					OR CITY	STATE	ZIP CODE	
Is apartment rented to you			-					
					e expire?			
Reason for leaving:					No. of Oo	ounante:		
Do you usually pay rent in					110. 01 00	.cupants		
Did you receive any notice					YES, explain:			
PREVIOUS LANDLO	PN							
				TEL.#:		FAX #:		
LANDLORD ADDRESS:								
-		STREET		APT#	TOWN OR CI	ΓY STΑ	ATE ZIP CODE	
APPLICANT'S ADDRESS:								
		STREET		APT#	TOWN OR CI	ΓY STA	ATE ZIP CODE	
Was apartment rented to you?	YES □	NO □ If NC), explain:					
Length of tenancy: from	n	to _	· -		Amount of re	ent per month	\$	
Were you then under a lease?					its term? YES □			
			-					
The reason for your leavin	g:							

Please provide list of all state resided:	tes in which any	household membe	er has			
Previous Apartment Address	s:					
Landlord Name:			Lar	ndlord Address:		
Why did you leave this apar	tment?					
Did you ever receive any no	tices of terminat	on of tenancy whi	le at ti	nis apartment? YES □ 1	NO □ If yes, please	explain:
Complete the following inform	mation for each r	nember of your fa	mily, i	ncluding yourself, who wil		
NAME	RELATIONSHIP	DATE OF BIRTH	SEX	OCCUPATION	F.T. STUDENT YES / NO	SOCIAL SECURITY NUMBER
TV-IVIL	RELATIONOLIII	DAIL OF BIRTH	OLX	OGGGI AHGI	1207110	NOMBER
			I		-	
EMPLOYMENT (for each	h household mer	nher aged 18 or o	ver).			
			• 0.).			
Individual Employed:						
Employer Name:						
Address:						
Dates of Employment:	FROM		ТО			
Gross Wages / Salary	\$	PER Y	ΈAR	TEL. #:		
Contact Person / Supervisor				FAX #:		
Contact i Cison / Capervisor	' -			170(#.		
Individual Employed:						
Employer Name:						
	-					
Address:						
Dates of Employment:	FROM		TO			
Gross Wages / Salary	\$	PER Y	EAR	TEL. #:		
Contact Person / Supervisor	r:			FAX #:		
OTHER SOURCES OF	INCOME (for	all Household N	/lemb	ers):		
		AN	MOUNT	RECEIVED PER MONTH	PERSON RECEIV	/ING SUCH INCOME
Social Security					, 1100111111111111111111111111111111111	
Supplemental Security Income (SSI)						
Pension / Annuity / Trust						
Public Assistance (TANF / AFDC / EAFDC / GR)						
Unemployment Compensation						
Worker's Compensation						
Child Support / Alimony						
Student Financial Assistance						
Other Income (please speci		\$				
Rental Assistance ((i.e. Sec. 8 mobile voucher, MRVP (Mass Rental Voucher)						

			ADDRESS		NUMBER	
			last two years of anyone livi Estate, Stocks, Bonds, and			
ASSET DESCRIPTION	SOURCE / BAN	K NAME	AMOUNT OR VALUE		ACCOUNT NUMBER	
			\$			
			\$			
			\$			
		!	\$			
			\$			
			\$			
			\$			
REDIT HISTORY (<u>Includ</u>	<u>de</u> payments, loans, cre	edit cards, et	c.):			
OWED TO	ACCOUNT NU	JMBER	CURRENT BALANCE	MONTHLY PAYMENT		
			\$	\$		
		!	\$	\$		
			\$	\$		
			\$	\$		
		:	\$	\$		
Oo you pay for utilities?	YES □ NO □ If yes	; \$	per month.			
Do you pay alimony?	•					
o you pay crillo care:	TES E NO E TI yes	, ψ	per monur.			

EQUAL OPPORTUNITY / FAIR HOUSING INFORMATION

Peabody Properties, Inc. does not discriminate on the basis of race, color, religion, national origin, gender, disability, familial status, marital status, sexual orientation, genetic information, veteran/military status, receipt of public assistance, ancestry, age, gender identity or other basis prohibited by federal, state, or local law in the access or admission to its programs or employment or its programs, activities, functions or services.

The following information will be required by the Federal Government to monitor this owner / management agent's compliance with Equal Housing Opportunity and Fair Housing Laws. The law provides that an applicant may not be discriminated against on the basis of the information supplied below whether or not the information is furnished.

Note: HUD Race and Ethnicity Data Form(s) must be attached for Subsidized Sites.

ETHNIC CATEGORIES				
☐ Hispanic or Latino	☐ Not-Hispanic of	or Latino		
RACE CATEGORIES				
☐ American Indian or Alaska Native		☐ Asian	☐ Black or African A	American
□ Native Hawaiian or Other Pacific Is	slander	☐ White	☐ Other	
$\ \square$ I do not wish to furnish the above in	nformation			
hereby certify that the information provided he understanding that this application constitute a lease or a promise by the owner or mana of the formation may be requested to complete provided in the complete provided in t	tutes my request fo agement agent tha	r consideration t an apartment	as a tenant in the above deve	elopment. It does not constitute
understand and grant permission for all copermission to authorize a credit bureau servibbtained through public records, personal or inquiry may include information as to my chaico make a written request within a reasonably inade.	rice to make any c telephonic intervie racter, credit worth	consumer report ews with my nei iness, credit sta	and investigative consumer ghbors, friends, or others wit anding, and credit capacity. I	report, whereby information is the whom I am acquainted. This understand that I have the right
understand that a false statement or misrepevent that I take occupancy, it shall be consider				
Finally, I understand and grant permission tagency, criminal checks, and/or other inquiring				
Peabody Properties, Inc. will consider a accommodation is necessary, not just des Reasonable accommodations may include and procedures.	sirable, to ensure e	nmodation, upo	n request for qualified peop the development, its amenit	ies, services and programs.
Please check here if you would li with a Request for a Reasonable Accom Service Coordinator to follow-up with y Procedures.	modation Form (R	A-1) and comp	olete a Referral Form (RA-2)	to the property's Resident
Date:	S	Signature:		
	S	Signature:		
Signatures and pro	oof of identification	on will be requ	ired of all those who sign	lease.
	FOR M	ARKET USE ON	LY	
A deposit (one month's rent) is required with this a	pplication. It will be be	ased as follows:		
1. Applied to your first month's rent if applic	cation is approved;			
2. Returned to the Applicant if application is	s not accepted with e	xplanation of deni	al;	
3. Retained as liquidated damages if applic	cation is approved and	d Applicant cance	Is his or her application.	
Amount of Deposit \$		Check #	Occupancy l	Date:
Signature:		Date:		
Signature:		Date:		