

Investors Management Associates, Inc.

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RENTAL APPLICATION

PROPERTY LOCATION(S) _____

APPLICANT

FULL NAME - (INCLUDE ALL NAMES YOU HAVE USED): _____

CONTACT PHONE (PLEASE INDICATE HOME/WORK/CELL: () _____

EMAIL ADDRESS: _____

SOCIAL SECURITY # _____ - _____ - _____ D.O.B. _____

DRIVERS LIC # _____ YR/MAKE/LICENSE PLATE# OF VEHICLE _____

CO-APPLICANT

FULL NAME - (INCLUDE ALL NAMES YOU HAVE USED): _____

CONTACT PHONE (PLEASE INDICATE HOME/WORK/CELL: () _____

EMAIL ADDRESS: _____

SOCIAL SECURITY # _____ - _____ - _____ D.O.B. _____

DRIVERS LIC # _____ YR/MAKE/LICENSE PLATE# OF VEHICLE _____

ADDITIONAL OCCUPANTS (SOCIAL SECURITY NO. -- D.O.B. -- MALE/FEMALE)

NAME: _____

RENTAL HISTORY

CURRENT ADDRESS _____

CITY, STATE, ZIP _____

DATES LIVED AT ADDRESS _____ REASON FOR LEAVING _____

LANDLORD/MANAGER _____ LANDLORD PHONE # _____

CURRENT MONTHLY RENTAL PAYMENT \$ _____

PREVIOUS ADDRESS _____

CITY, STATE, ZIP _____

DATES LIVED AT ADDRESS _____ REASON FOR LEAVING _____

LANDLORD/MANAGER _____ LANDLORD PHONE # _____

PREVIOUS MONTHLY RENTAL PAYMENT \$ _____

ADDITIONAL PREV ADDRESS _____

CITY, STATE, ZIP _____

DATES LIVED AT ADDRESS _____ REASON FOR LEAVING _____

LANDLORD/MANAGER _____ LANDLORD PHONE # _____

MILITARY STATUS PRESENT OR PAST -- GIVE DETAILS) _____

EMPLOYMENT HISTORY

PRESENT EMPLOYERS NAME AND ADDRESS _____

DATES AT THIS JOB _____ POSITION _____ PHONE # () _____

SUPERVISOR _____ SUPERVISOR PHONE # () _____

PREVIOUS EMPLOYERS NAME AND ADDRESS _____

DATES AT THIS JOB _____ POSITION _____ PHONE # () _____

SUPERVISOR _____ SUPERVISOR PHONE # () _____

HAVE YOU EVER: FILED FOR BANKRUPTCY? _____

BEEN EVICTED FROM TENANCY? _____

WILLFULLY OR INTENTIONALLY REFUSED TO PAY RENT WHEN DUE? _____

WE WILL RUN A CREDIT AND CRIMINAL BACKGROUND CHECK, IS THERE ANYTHING NEGATIVE WE MAY FIND THAT YOU WOULD LIKE TO COMMENT ON?:

INCOME

YOUR GROSS MONTHLY EMPLOYMENT INCOME \$ _____

CO-APPLICANTS MONTHLY GROSS INCOME \$ _____

AVERAGE MONTHLY OTHER INCOME \$ _____

TOTAL MONTHLY INCOME \$ _____

TOTAL OF RENTAL ASSISTANCE RECEIVED \$ _____

CREDIT AND FINANCIAL INFORMATION

BANK YOU USE _____ BRANCH _____

MISCELLANEOUS

DESCRIBE THE NUMBER AND TYPE OF PETS YOU HAVE _____

REFERENCES AND EMERGENCY CONTACT

PERSONAL REFERENCE: _____ RELATIONSHIP _____

ADDRESS _____ PHONE (____) _____

CONTACT IN EMERGENCY: _____ RELATIONSHIP _____

ADDRESS _____ PHONE (____) _____

HOW DID YOU HEAR ABOUT US? _____

CREDIT CHECK RELEASE

I/WE HEREBY APPLY FOR THE APARTMENT LISTED ABOVE, WITH MY/OUR SIGNATURE(S) BELOW. I/WE HEREBY AUTHORIZE AND REQUEST ALL CREDIT REPORTING AGENCIES EMPLOYERS, CREDIT AND PERSONAL REFERENCES RELEASE ALL PERTINENT INFORMATION ABOUT ME/US. A PHOTOCOPY OF THIS SHALL BE AS VALID AS THE ORIGINAL. I UNDERSTAND THAT THE CREDIT REPORT (RENTAL HISTORY, ARREST AND OR CONVICTION RECORDS, AND RETAIL CREDIT HISTORY) WILL BE DONE AT THE FACILITIES OF CAPITAL CITY CREDIT COMPANY, 993 Farmington Ave #210, West Hartford, CT 06107

THE COST OF THIS CREDIT CHECK IS \$50.00 PER PERSON OVER THE AGE OF 18 AND THE COST OF THIS CREDIT CHECK IS THE RESPONSIBILITY OF THE APPLICANT. THIS FEE IS NOT REFUNDABLE. SECURITY DEPOSITS ARE NOT REFUNDABLE UNTIL LEASE IS SIGNED. TWO PAST NON-FAMILY RENTAL REFERENCES REQUIRED, 25% OF MONTHLY INCOME IS CALCULATED FOR HOUSING. RENTALS ARE ON A FIRST-COME-FIRST SERVE BASIS.

SIGNED _____ **DATE** _____

SIGNED _____ **DATE** _____

