(Subject to Owners Approval)

	```		,	DATE	NUMBER
NAME OF APPLICANT	PHONE (Indicate home,	, work or cell)	EMAIL ADDRESS		INITIAL (if over 18 years of age
PRESENT ADDRESS		DATES OF CU	RRENT OCCUPANCY:	FROM	ТО
CITY STATE	ZIP CODE	AUTOMOBILE:	MAKE/YEAR/REG. ST	ATE & NO.	SOCIAL SECURITY#
PRESENT LANDLORD	COMPLETE ADDR	ESS			PHONE NUMBER
FORMER LANDLORD	OCCUPANCY	COMPLE	TE ADDRESS		PHONE NUMBER
CURRENT EMPLOYER	COMPLETE ADDR	ESS			PHONE NUMBER
OCCUPATION/SOURCE OF INCOME	TYPE OF BUSINES	ss :	SALARY		LENGTH OF EMPLOYMENT
FORMER EMPLOYER	LENGTH OF EMPL	OYMENT CO	MPLETE ADDRESS		PHONE NUMBER
PERSONAL REFERENCE (NAME)	COMPLETE ADDRESS			PHONE NUMBER	
IN CASE OF EMERGENCY NOTIFY (NAME	) COMPLETE ADDR	COMPLETE ADDRESS			PHONE NUMBER
CREDIT REFERENCE	COMPLETE ADDR	COMPLETE ADDRESS			PHONE NUMBER
BANK - CHECKING ACCOUNT	BRANCH ADDRESS				ACCOUNT NUMBER
BANK - SAVINGS ACCOUNT	BRANCH ADDRES	BRANCH ADDRESS			ACCOUNT NUMBER
NAME OF ALL CO-TENANTS (EACH ADU	JLT MUST FILE A SEP	ARATE APPLIC	ATION)	Base rent per mo	onth \$
APARTMENT NO./TYPE TOTAL NO. OF OCCUPANTS NO. OF ADULTS NO. OF PETS			(Subject to escal Other Monthly Cl	ation as set forth in lease) narges	
ADDRESS	- NAMES & AGES OF MINOR CHILDREN (e.g. parking, etc.) Rental Fee:				
CITY	OCCUPANCY DAT	E RENT BI	EGINS	Last Month's Rer	nt
	FROM (DATE) TO (DATE) Deposit on Account _   Balance Due Balance Due				unt

Base rent and other monthly charges are due and payable on the first day of each month in advance.

Pursuant to Massachusetts law, the Management shall not make any inquiry concerning race, religious creed, color, national origin, sex, sexual orientation, age, (except if a minor), ancestry or marital status of the Applicant or concerning the fact that the Applicant is a veteran or a member of the armed forces or is handicapped. The Applicant authorizes the Management and/or Renting Agency to obtain or cause to be prepared a consumer credit report relating to the Applicant. APPLICANT ACKNOWLEDGES RECEIVING HARVARD AVE REALTY FEE DISCLOSURE Initial

Neither the Owner nor the Management is responsible for the loss of personal belongings caused by fire, theft, smoke, water or otherwise, unless caused by their negligence.

The undersigned warrants and represents that all statements herein are true and agrees to execute upon presentation a Rental Housing Association lease or Tenancy at Will agreement in the usual form, a copy of which the Applicant has received or has had occasion to examine, which lease or agreement may be terminated by the Lessor if any statement herein made is not true. Deposit is to be applied as shown above, or applied to actual damages sustained by the Owner, except it is to be refunded if said application is not accepted by the Owner. This application and deposit are taken subject to previous applications.

THIS APPLICATION MUST BE ACTED UPON BY THE OWNER ON OR BEFORE

The Renting Agent is an independent contractor and has no authority to make any representation concerning the premises; the Renting Agent is only authorized to show the apartment for rent and to assist in the screening of Rental Applicants.

Renting Agent

Applicant Signature

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Upon acceptance a fee of 1 months rent is due Harvard ave realty. Form generated by: True Forms[™] www.TrueForms.com 800-499-9612

