



198 SACO AVENUE OLD ORCHARD BEACH, ME 04064 Tel. 207.934.7622 Fax. 207.934.1566

NOTE: \$20.00 FEE PER APPLICANT IS REQUIRED TO PROCESS APPLICATION

NAME OF LEASING AGENT/ PROPERTY MANAGER ASSISTING YOU:										
DATE OF APPLICATION:	DESIRED MOVE IN DATE:									
	DDRESS OF PROPERTY:									
APPLICANT EMAIL(S):										
APPLICANT TELEPHONE NUMBER(S):										
PERSONAL INFORMATION:										
APPLICANT NO. 1: LAST NAME:			FIRS	M.I.:						
DATE OF BIRTH:	DRIVERS	S LICENSE #: SOCIAL SECURITY #:								
APPLICANT NO. 2: LAST NAME:	LAST NAME:		FIRS	M.I.:						
DATE OF BIRTH:	DRIVERS LICENSE #: _		SOCIAL SECURITY #:							
OTHER OCCUPANTS FOR THIS F	RESIDENCE:									
NAME:	_ RELATION:		_ DATE OF BIRTH:	S.S. # (If over 18):						
NAME:	_ RELATION:		_ DATE OF BIRTH:	S.S. # (If over 18):						
NAME:	_ RELATION:		_ DATE OF BIRTH:	S.S. # (If over 18):						
NUMBER OF VEHICLES (INCLUD	ING COMPANY	CARS):								
MAKE/MODEL:			COLOR:	LICENSE:	STATE:					
MAKE/MODEL:		_ YEAR:	COLOR:	LICENSE:	STATE:					
MAKE/MODEL:		_ YEAR:	COLOR:	LICENSE:	STATE:					
PETS: DO YOU HAVE PETS: YES NO PLEASE DESCRIBE:										
PERSONAL REFERENCES & MIS	CELLANEOUS	INFORMATIC	ON:							
NAME:		TELEPHONE	E:							
NAME:	TELEPHONE:		: RELATION:							
IN CASE OF EMERGENCY NOTIF	Y:									
NAME:	RELATION: TELEPHONE:									
ADDRESS:		ALTERNATE TELEPHONE:								
			<u> </u>							
RESIDENCE HISTORY:										
PRESENT ADDRESS:		CITY/STATE/ZIP:								
		AMOUNT OF MO. RENT/MORTGAGE:								
		TELEPHONE #:								
REASON FOR LEAVING:										

PREVIOUS ADDRESS:		CITY/STATE/Z	IP:				
LENGTH OF TIME AT PRESENT:	SENT: AMOUNT OF MO. RENT/MORTGAGE:						
LANDLORD/MORTGAGOR:	TELEPHONE NO:						
REASON FOR LEAVING:							
EMPLOYMENT HISTORY	-						
PRESENT EMPLOYMENT- APPLICANT NO. 1:	FULL TIME:	PART TIME:	STUDENT:	RETIRED:			
EMPLOYER:							
	UPERVISOR:HOW LONG:						
	/EEK:						
		-					
PREVIOUS EMPLOYMENT- APPLICANT NO. 1:	EIII TIME:	DART TIME:	STUDENT: E	PETIDED:			
		TELEPHONE:					
HOW LONG:POSITION:	PR	EVOUS INCOME:	PER WEEN	··			
PREVIOUS EMPLOYMENT- APPLICANT NO. 2:	: FULL TIME:	PART TIME:	STUDENT: F	RETIRED:			
EMPLOYER:	ADDRESS:		TELEPHO	ONE:			
HOW LONG:POSITION:		PREVOU	S INCOME:	PER WEEK:			
PRESENT EMPLOYMENT- APPLICANT NO. 2:	FULL TIME:	PART TIME:	STUDENT: F	RETIRED:			
EMPLOYER:							
POSITION: SUPERVISOR: HOW LONG: PRESENT INCOME: PER WEEK:							
		-					
OTHER INCOME:							
SOURCE:		AMOUNT [.]		PFR·			
SOURCE:							
OTHER INFORMATION: HAVE YOU EVER FILE							
HAVE YOU EVER WILLFULLY REFUSED TO PA				RIME: IF YES,			
WHEN? DESCRIBE:							
IT IS OUR POLICY NOT TO DISCRIMINATE ON THE E	BASIS OF RACE, COLOF	R, RELIGION, AGE, SEX	, HANDICAP, FAMILIA ST	ATUS, OR NATIONAL ORIGIN.			
THEREBY AUTHORIZE WING REAL ESTATE OR ANY A CENTRACENTAL STATE OF							
I HEREBY AUTHORIZE KING REAL ESTATE OR ANY AGENT/ SERVANT/ EMPLOYEE OF KING REAL ESTATE TO CONTACT ANY PRIOR EMPLOYERS, COMPANIES, CREDIT BUREAUS, LAW ENFORCEMENT AGENCIES AND/OR CONSUMER REPORTING BUREAUS FOR THE PURPOSE OF VERIFYING,							
RECORDING AND/OR CONFIRMING THE ABOVE INFORMATION WHICH I STATE IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I AUTHORIZE							
AND CONSENT TO THE RELEASE AND RECORDING OF THIS INFORMATION AND HEREBY RELEASE THE ABOVE & THEIR AGENTS/SERVANTS, &							
EMPLOYEES FROM ANY AND ALL LIABILITY & RESPONSIBILITY FOR THEIR DOING SO.							
DATE: SIGNATURE OF	APPLICANT 1:						
DATE: CIONATURE OF	ADDI IOANIT O						
DATE: SIGNATURE OF	APPLICANT 2:						
			AND 00 01011-				
REMINDER: DOCUMENTS THAT MUST BE INCLUDED FOR EACH APPLICANT AND CO-SIGNER(S) OVER THE AGE OF 18:							
PICTURE ID: RECENT PAY STUB: RECENT BANK STATEMENT: APPLICATION FEE: S.S.#:							