

Madison Place, LLC
604 North Greece Road
Hilton, New York 14468
Rental Office: 585-392-2177
Corporate Office: 585-392-5200
www.tra-mac.com

Lease Address: _____ Lease Amount: _____ Move-in-Date: _____

LEASE APPLICATION
This is an Individual Application – Please Complete And Sign

Last Name _____ First _____ Middle _____

Social Security # _____ Birthday _____ Driver's License # _____ State Issued _____

Home Phone# _____ Cell Phone# _____ Work Phone # _____

E-Mail _____ PLEASE LIST ALL OTHERS WHO WILL BE LIVING IN
RESIDENCE (Full Name, Age, Relationship) _____

RESIDENCE (minimum 2 years)

Current Address
Street Number & Name _____ Apt. # _____ City _____ State _____ Zip code _____

From _____ To _____ Reason for Leaving _____ Own/Rent \$ _____ \$month
Property Manager/Owner _____ Phone _____

Previous Address
Street Number & Name _____ Apt. # _____ City _____ State _____ Zip code _____

From _____ To _____ Reason for Leaving _____ Own/Rent \$ _____ / month
Property Manager/Owner _____ Phone _____

Prior Address
Street Number & Name _____ Apt. # _____ City _____ State _____ Zip code _____

From _____ To _____ Reason for Leaving _____ Own/Rent \$ _____ / month
Property Manager/Owner _____ Phone _____

EMPLOYMENT (minimum 2 years)

Current Employer _____ Supervisor's Name _____

Address _____ How Long _____

Position _____ Gross Monthly Salary \$ _____ Work Phone _____

Previous Employer _____ Supervisor's Name _____

Address _____ How Long _____

Position _____ Gross Monthly Salary \$ _____ Work Phone _____

OTHER INCOME (Verifiable only; if self-employed or retired, be prepared to provide personal tax returns, W-2, etc.)

Source _____ Amount \$ _____ /month

BANKING

Checking Account # _____ Bank _____ Branch _____
Savings Account # _____ Bank _____ Branch _____
Loan # _____ Loan Type _____

IN CASE OF EMERGENCY

Name of closest relative _____ Relationship _____
Address _____
Home Phone _____ Cell Phone _____ Work Phone _____
E-Mail _____

MISCELLANEOUS INFORMATION

Automobile – Year _____ Make _____ Model _____ Color _____ License # _____
Automobile – Year _____ Make _____ Model _____ Color _____ License # _____

HAVE YOU EVER BEEN DELINQUENT IN PAYMENT OF YOUR RENT OR ANY OTHER FINANCIAL OBLIGATION? IF YES, PLEASE EXPLAIN: _____

HAVE YOU EVER BEEN A DEFENDANT IN AN UNLAWFUL DETAINING (EVICTION), LAWSUIT OR DEFAULTED (FAILED TO PERFORM) ANY OBLIGATION OF A RENTAL AGREEMENT OR LEASE? IF YES, PLEASE EXPLAIN: _____

HOW DID YOU HEAR ABOUT US? _____

APPLICANT'S SIGNATURE

I understand I acquire no rights in a specified unit until I sign the lease agreement and submit a damage/rent deposit as described in the lease agreement. I hereby waive all rights to the return of the application fee in the event I do not choose to enter into the lease agreement or do not meet the resident screening criteria.

\$25.00 NON-REFUNDABLE APPLICATION FEE

THE INFORMATION ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. AS PART OF THE RESIDENTIAL RENTAL APPLICATION PROCESS, IT IS THE POLICY OF BARBERRY COVE, LLC TO OBTAIN INFORMATION ON EACH APPLICANT. I HEREBY AUTHORIZE A BACKGROUND CHECK, A CHARACTER CHECK AND THE ORDER OF A CONSUMER REPORT ON ME TO ENABLE EVALUATION OF MY APPLICATION TO RENT RESIDENTIAL PROPERTY.

APPLICANT'S SIGNATURE

DATE

If adverse action is taken based on the consumer report, you have the rights under the Fair Credit Reports Act, including the right to obtain a free copy of the report and to dispute the accuracy or completeness of any information in such report.

I am aware that an incomplete application causes a delay in pre-screening and may result in denial of tenancy.