VILLAGE APARTMENTS, LLC.

82 Jerome Road, Unit 9-7, Uncasville, CT 06382

OFFICE: (860) 848-4APT or (848-4278) FAX: (203) 356-0448

Standard Rental Application For Apartment

Today's Date:	Bedrooms Requested:	Floor Preferred:	
Annlicants Name		Soc Sec No	1 1
Date of Birth:			
*Co Applicants Name:	Phone No.	Work N	lo
*Must Fill Out Separate Application			
Date of Birth:	Email Address:		
Current Address/Town:		Rent: \$	How Long:
Reason For Leaving:	Landlord's Name: _		Phone:
Previous Address/Town:		Rent: \$	How Long:
Reason For Leaving:	Landlord's Name:		Phone:
Employment:		How Long:	
Phone:	Income Per Week:	Monthly Income All Sources: \$	
In Case of Emergency Contacts (I	Must list 2 Contacts With Phone Numbers:)	Number of Adults	In Apt:
		Number of Children in Apt:	
		Do you have a Pet? (Yes) (No)	
Car Make and Model:		Peg No	
If you own a Pet Rreed:	Weight: Type:	Neg No Do you l	nave Insurance: (Y) (N)
	/es) (No) Have you ever refused		
Personal References:	B 1 22 12	D	
Name:	Relationship	Phone N	lo
Name:	Relationship	Phone N	lo
Name:	Relationship	Phone N	lo
any consumer report and investigation or telephone interviews with my neas to my character, general reputation medical information as pertains to within a reasonable period of time made. I warrant that all statements made	rize Goldline Credit, the landlord's credit dat ative consumer report, whereby information eighbors, friends or others whom I am acquation, personal characteristics, credit worthing tenancy. I understand that I have the right to receive additional, detailed information at eon this application are true.	is obtained through painted. The inquiry maness, credit standing, on make a written requisiont the nature of any	ublic records, personnel, by include information credit capacity, and lest to the Landlord
OIGNATURE.		DATE:	
Apartment Needed By Date:	Deposit Taken:		One Two Three B/R