

FOR OFFICE USE ONLY:

Affordable housing: YES NO Security Deposit/Monthly Rent (w/ fees): _____ Lease Term: _____
Bedrooms: Studio 1 2 3 4 or more Marketing Source: _____

Port Property

M A N A G E M E N T

104 Grant Street ~ Portland, ME ~ 04101

Telephone #: (207) 775-5673 / Fax #: (207) 761-8048 / www.portpropmgt.com

RENTAL APPLICATION

This is an application for housing at _____, apartment # _____ for the rental rate of \$ _____. Please complete this form and return it to our office at the above-mentioned address.

Date of Showing: _____ Date of Application: _____ Rental Agent: _____

Amt of Concession: _____ Requested lease start date: _____ Latest possible move-in date: _____

APPLICANT INFORMATION:

First Name: _____ Last Name: _____ M.I. _____

Current Address: _____

Soc. Sec. #: _____ D.O.B.: _____ License # & State: _____

Contact Number: _____ Secondary Number: _____ Email: _____

Applicant employment history:

Salary: _____ Yearly Monthly (Please circle)

Place of Employment: _____ Occupation: _____

Supervisor: _____ Work#: _____ Start Date: _____

Are you a Student? Yes No Income: _____ Source: _____

If you are unemployed please describe source of income: _____

ROOMMATE/SPOUSE INFORMATION:

First Name: _____ Last Name: _____ M.I. _____

Current Address: _____

Soc. Sec. #: _____ D.O.B.: _____

Driver's Lic: _____ Lic. State: _____

Phone: _____ Email: _____

Roommate/Spouse employment history:

Salary: _____ Yearly Monthly (Please circle)

Place of Employment: _____ Start Date: _____

Supervisor: _____ Phone #: _____

APPLICANT RENTAL HISTORY: (Please provide most recent 2 years - attach additional page if needed)

Current Address: (Note that you must provide your current address, whether it's a rental or not!!)

Address: _____ City: _____ State: _____ Zip: _____

Rent: _____ Utilities Included: _____ Dates of Residency: _____

Reason for Moving: _____

Current Landlord: _____ Daytime Phone #: _____

Previous Address:

Address: _____ City: _____ State: _____ Zip: _____

Rent: _____ Utilities Included: _____ Dates of Residency: _____

Reason for Moving: _____

Previous Landlord: _____ Daytime Phone #: _____

GENERAL QUESTIONS:

Do you have housing assistance? : *Yes No* If so, which agency? _____

Pets? : *Yes No* Description (type, size, age): _____

Do you smoke? : *Yes No*

Have you ever been evicted? : *Yes No* Explain: _____

Have you ever been convicted of a felony? : *Yes No* Explain: _____

How did you hear about us? : Craigslist / MaineToday.com / Press Herald / Other: _____

A PPM Resident (list name): _____

IN CASE OF AN EMERGENCY: Name: _____ Phone: _____

Relationship: _____

I/We do hereby certify that the information on this application is correct and complete to the best of my/our knowledge. I/We do hereby authorize Port Property Management, any of its staff and/or an authorized representative to contact any prior employers, companies, credit bureaus, law enforcement agencies and/or consumer reporting bureaus, including but not limited to FIRST Advantage Corporation Saferent. I/We agree to make a deposit of one (1) month's rent totaling \$_____, in addition to the \$25.00 application fee per person with this application. Should I/we decide not to rent the aforementioned apartment after twenty-four (24) hours from the verbal approval of this application the deposit will be held as a security deposit to cover any rent lost incurred due to PPM taking the apartment off the rental market. I/We understand that at the time of lease signing, the first month's rent and security deposit will be due. In the event that Port Property Management rejects this application, I/We understand that the application deposit will be returned, but any and all application fees are non-refundable. I authorize and consent to the permanent recording and retention by FIRST Advantage Corp. of this application. However, this application and the information herein may only be re-published and released upon my subsequent written or electronic authorization and only to a third party I specifically designate. I release and hold FIRST Advantage Corp. harmless from any and all liability for said acts provided these conditions are met.

APPLICANT'S SIGNATURE: _____ **DATE:** _____

ROOMMATE/SPOUSE'S SIGNATURE: _____ **DATE:** _____
