

KINGS PARK MANOR
300 Ardito Avenue
Kings Park, NY 11754

A 55+ SENIOR COMMUNITY

RENTAL APPLICATION

DATE: _____ DATE OF OCCUPANCY: (month / year) _____

Check all that apply: *(what type of apartment are you interested in?)*

_____ 1 bedroom lower unit w/ one bath _____ 2 bedroom lower unit w/ one bath

_____ 1 bedroom upper unit w/ one bath _____ 2 bedroom upper unit w/ one bath

APPLICANT

NAME: _____ SOCIAL SECURITY # _____

DOB: _____ DRIVERS LICENSE: _____

ADDRESS: _____ DAY PHONE: _____

CITY: _____ STATE: _____ ZIP CODE: _____ EVE: PHONE: _____

CO-APPLICANT

NAME: _____ SOCIAL SECURITY # _____

DOB: _____ DRIVERS LICENSE: _____

ADDRESS: _____ DAY PHONE: _____

CITY: _____ STATE: _____ ZIP CODE: _____ EVE: PHONE: _____

PRESENT ADDRESS: _____ HOME PHONE: _____

How long at current address: _____

RENT? Landlord's Name & Phone #: _____

Current monthly rent payment: \$ _____

Reason for moving: _____

CURRENT EMPLOYER: (If retired, skip to other income)

EMPLOYER: _____ BUSINESS PHONE: _____

Position: _____ How long: _____ Annual Income: _____

OTHER INCOME:

SS Entitlement (monthly) _____ Pension Income: _____ Other Income: _____

BANK NAME: _____ City: _____ State: _____ Phone: _____

VEHICLE(S):

Vehicle Make & Model: _____ Year: _____ Color: _____ License Plate#: _____

Vehicle Make & Model: _____ Year: _____ Color: _____ License Plate#: _____

NEAREST RELATIVE NOT LIVING WITH YOU/EMERGENCY CONTACT:

Name: _____ Relationship: _____

Address: _____ Day Phone: _____ Evening Phone: _____

I/we represent that the information is true and correct to the best of my/our knowledge. I/we have deposited \$250.00 in good faith to hold our apartment. If approved, I/we hereby acknowledge that my good faith deposit shall be applied to my/our first month's security deposit. Upon approval, all matters concerning this application must be finalized by lease signing within 7-10 days of move-in date. I/we understand that the balance of all securities and rent must be paid upon lease signing by certified funds. The good faith deposit of \$250.00 is refundable if Applicant(s) are denied or this application is cancelled by applicant. I/we understand that this application is not a rental agreement and that this application does not create any obligation on behalf of the Landlord. I/we understand that the information provided might be used by the landlord to determine whether to accept this application. I/we authorize the Landlord to verify all information given in this application, including banking information, employment, rental history, and personal references. I/we also authorize the Landlord to perform a credit check and criminal history check. I/we consent to the release of information relating to my credit and the information provided in this application.

APPLICANTS SIGNATURE: _____ DATE: _____

CO-APPLICANTS SIGNATURE: _____ DATE: _____