

Napier Enterprises, LLC

Quality rental properties and services

42 Independence St, Rochester, NY 14611

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RENTAL APPLICATION

Location: _____

Rent: _____ Water: _____

APPLICANT INFO:

First Name: _____ Last Name: _____ DOB: _____

Current Rental Address: _____ How Long? _____

City: _____ State: _____ Zip: _____ Phone #: _____

SSN: _____ Email: _____

ID #: _____ Type of ID (NYDL, ID, etc): _____

Current Landlord: _____ Phone #: _____

Previous Landlord: _____ Phone #: _____

Previous Rental Address: _____ How Long? _____

Children? _____ # Adults? _____ # Pets? _____ Describe Pets: _____

CO-APPLICANT INFO:

First Name: _____ Last Name: _____ DOB: _____

Current Street Address: _____ How Long? _____

City: _____ State: _____ Zip: _____ Phone #: _____

SSN: _____ Email: _____

ID #: _____ Type of ID (NYDL, ID, etc): _____

Current Landlord: _____ Phone #: _____

Previous Landlord: _____ Phone #: _____

Previous Rental Address: _____ How Long? _____

INCOME: PLEASE INCLUDE ALL FORMS OF INCOME TO QUALIFY

EMPLOYMENT:

Applicant Employer: _____ How Long? _____

Telephone Number: _____ Monthly Income: _____

Co-Applicant Employer: _____ How Long? _____

Telephone Number: _____ Monthly Income: _____

SECTION 8: (if applicable)

Housing Specialist's Name: _____ Phone #: _____

DSS: (if applicable)

Case Worker's Name: _____ Phone #: _____

Case #: _____ Amount Paid: _____ Start Date: _____

REFERENCES: (supervisor, boss, pastor known for a long time - NOT family)

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Name: _____ Phone #: _____

By signing below, you are consenting to the following: a back ground check, a credit check, an eviction history check, and verification of an active public assistance case. This list is not exhaustive, and additional requirements may arise for prescreening prior to an offer of tenancy. This application is not an acceptance of tenancy!

Applicant: _____ Date: _____

Co-Applicant: _____ Date: _____

FOR OFFICE USE ONLY

PAID \$15.00 APPLICATION FEE PER APPLICANT?

YES, AMT _____ NO _____ DATE _____

Accepted By _____