

RHODE ISLAND RENTAL APPLICATION

Application Fee: \$_____ (non-refundable)

PROPERTY DETAILS

Property Type: Apartment Condominium House Other: _____

Property Address: _____

Monthly Rent: \$_____

Bedrooms: _____ Bathrooms: _____ Square Feet: _____

Lease Type: Fixed-Term Month-to-Month Start Date: _____

Pets Allowed? Yes No - If yes, types allowed: _____

Parking? Yes No - If yes, describe: _____

Smoking Allowed? Yes No

APPLICANT'S DETAILS

Applicant's Full Name: _____ SSN: _____

Date of Birth: _____ Phone: _____

E-Mail: _____

Photo ID: Driver's License Passport Other: _____

ID#: _____

Are you a U.S. Citizen? Yes No - If no, describe where: _____

Do you have pets? Yes No - If yes, describe: _____

APPLICANT'S CURRENT RESIDENCE

Property Type: Apartment Condominium House Other: _____

Property Address: _____

Monthly Rent: \$_____

Bedrooms: _____ Bathrooms: _____ Square Feet: _____

Lease Start: _____ Lease End: _____

Reason for Moving: _____

Landlord's Name: _____

Landlord's Phone: _____ Landlord's E-Mail: _____

APPLICANT'S PREVIOUS RESIDENCE - 1

Property Type: Apartment Condominium House Other: _____

Property Address: _____

Monthly Rent: \$_____

Bedrooms: _____ Bathrooms: _____ Square Feet: _____

Lease Start: _____ Lease End: _____

Reason for Moving: _____

Landlord's Name: _____

Landlord's Phone: _____ Landlord's E-Mail: _____

APPLICANT'S PREVIOUS RESIDENCE - 2

Property Type: Apartment Condominium House Other: _____
Property Address: _____
Monthly Rent: \$ _____
Bedrooms: _____ Bathrooms: _____ Square Feet: _____
Lease Start: _____ Lease End: _____
Reason for Moving: _____
Landlord's Name: _____
Landlord's Phone: _____ Landlord's E-Mail: _____

APPLICANT'S CURRENT EMPLOYER

Employer: _____
Employer's Address: _____
Title / Occupation: _____
Gross Monthly Income: \$ _____ Start Date: _____
Supervisor's Name: _____
Supervisor's Phone: _____ Supervisor's Email: _____

APPLICANT'S PREVIOUS EMPLOYER

Employer: _____
Employer's Address: _____
Title / Occupation: _____
Gross Monthly Income: \$ _____ Start Date: _____
Supervisor's Name: _____
Supervisor's Phone: _____ Supervisor's Email: _____

APPLICANT'S VEHICLES

Do you have a vehicle? Yes (describe below) No
Make: _____ Model: _____ Year: _____
Color: _____ Plate #: _____ State: _____

Do you or a co-Tenant have a second vehicle? Yes (describe below) No
Make: _____ Model: _____ Year: _____
Color: _____ Plate #: _____ State: _____

PUBLIC RECORDS

Eviction. Have you ever been evicted or a defendant in an eviction action? Yes No
If yes, describe: _____.

Bankruptcy. Have you ever filed, or are you in the process of filing bankruptcy? Yes No
If yes, describe: _____.

CONSENT & ACKNOWLEDGMENT

I hereby certify that I am at least 18 years of age and that all information given on this application is true and correct. I authorize the Landlord and its agents to obtain an investigative consumer credit report including but not limited to credit history, OFAC search, landlord/tenant court record search, criminal record search and registered sex offender search. I authorize the release of information from previous or current landlords, employers, bank representatives, and personal references. I agree to furnish additional credit and/or personal references upon request. I understand incomplete or incorrect information provided in this application may cause a delay in processing which may result in denial of tenancy. This investigation is for resident screening purposes only and is strictly confidential. I hereby hold Landlord and its agents free and harmless of any liability for any damages arising out of any improper use of this information. Important information about your rights under the Fair Credit reporting Act:

- You have a right to request disclosure of the nature and scope of the investigation.
- You must be told if information in your file has been used against you.
- You have a right to know what is in your file, and this disclosure may be free.
- You have the right to ask for a credit score (there may be a fee for this service).
- You have the right to dispute incomplete or inaccurate information. Consumer reporting agencies must correct inaccurate, incomplete, or unverifiable information.

Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Avenue N.W., Washington D.C. 20580.

In connection with my application for housing, I understand that the property owner/agent may obtain one or more consumer reports, which may contain public information, for the purposes of evaluating my application. These consumer reports will be obtained from one or more of the following consumer reporting agencies:

- Equifax, E.C.I.F., P.O. Box 740241, Atlanta, GA, 30374-0241, (800) 685-1111
- Trans Union, Regional Disclosure Center, 1561 Orangethorpe Ave., Fullerton, CA, 92631, (714) 738-3800
- Experian (TRW), Consumer Assistance, P.O. Box 949, Allen, TX, 75002, (888) 397-3742

These consumer reports are defined as investigative consumer reports. These reports may contain information on my character, general reputation, personal characteristics and mode of living. In connection with my application for housing, I authorize owner/agent to obtain a consumer report from the consumer reporting agencies listed above.

Applicant's Signature: _____ **Date:** _____

Print Name: _____