Doherty Real Estate 1100 University Ave, Suite 201 Rochester, NY 14607 Est. 1914

Rental Application Phone: (585) 271-8600 Fax: (585) 271-1415 Email: info@dohertyrealty.com

Applicant's Las	st Name	First	Middle	Birthdate	Driver's Lice	nse #/State	Soc. Sec. No.
Spouse's Name				Birthdate	Driver's License #/State		Soc. Sec. No.
Other Occupant	ts and Their Re	elationship			1		
Pets? [] Yes [] No	How Many?	How Many? Type, Breed, Weight & Age					
PART I -	RESIDE	ENCE F	HISTORY				
Present Address	5	City	State	Zip	How Long?	Phone	[] Own [] Rent
Name/Address	of Present Lan	dlord/Mortg	;age Co.			Phone	Monthly Pmt (\$)
Previous Addre	SS			Previous La	Landlord Phone		How Long?
PART II	- EMPL	OYME	NT HISTOR	RY			
Employer					Supervisor		How Long?
Address		City	State	Zip	Phone	Position	Salary
Previous Employer					Supervisor		How Long?
Address		City	State	Zip	Phone	Position	Salary
Spouse Employed By					Supervisor		How Long?
Address		City	State	Zip	Phone	Position	Salary
			Additional income to be included for			, or separate r	naintenance need NOT
Source:			Phone:		_ Amount (\$):	per	

PART III - CREDIT AND	LOAN	REFERENC	CES			
# of Vehicles Do you have any recreation	al vehicles, va	ans, boats, motorcycl	les? If so, spec	ify:		
Vehicle 1 - Make/Model	Color	License Plate	License Plate No.		State	
Financed/Leased Thru	Phone	Account No.	Account No.		Monthly Pmt (\$)	
Vehicle 2 - Make/Model	Color	License Plate	License Plate No.		State	
Financed/Leased Thru	Phone	Account No.	Account No.		Monthly Pmt (\$)	
Loans & Charge Accounts (Including	g Banks, Dept	t. Stores, Credit Card	s, etc. Do not	list vehicle loan	s listed above)	
Owed To	A	Account No.		Total Owed	Monthly Pmt (\$)	
PART IV - BANK REFER	ENCES			•		
Name of Bank/Financial Institution	Checking/Savings Acct. #		Phone Bran		ch - City - State	
In Case of Emergency, Notify:	Relationship		Day Phone		Night Phone	
Please give any additional inform	nation whic	ch might help ev	valuate this	s applicatior	n:	

I hereby apply to lease the above described premises for the term and upon the conditions above set forth and agree that the rental is to be payable the day of each month in advance. As an inducement to the owner of the property and to the agent to accept this application, I warrant that all statements above set forth are true; however, should any statement made above be a misrepresentation or not a true statement of facts, all of the deposit will be retained to offset the agent's cost, time, and effort in processing my application.

I hereby deposit the equivalent of the first month's rent as earnest money to be refunded to me if this application is not accepted within five business banking days. Upon acceptance of this application, this deposit shall be retained as part of the security deposit. When so approved and accepted I agree to execute a lease for _____ months before possession is given and to pay the balance of the security deposit within _____ business banking days after being notified of my inquiry and application, including making necessary investigation of my credit, character, and reputation. If this application is not approved and accepted by the owner or agent, the deposit will be refunded, the applicant hereby waiving any claim for damages by reason of nonacceptance which the owner or his agent may reject without stating any reason for so doing.

I RECOGNIZE THAT AS A PART OF YOUR PROCEDURE FOR PROCESSING MY APPLICATION, AN INVESTIGATIVE CONSUMER REPORT MAY BE PREPARED WHEREBY INFORMATION IS OBTAINED THROUGH PERSONAL INTERVIEWS WITH MY NEIGHBORS. FRIENDS, AND OTHERS WITH WHOM I MAY BE ACQUAINTED. THIS INQUIRY INCLUDES INFORMATION AS TO MY CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS, AND MODE OF LIVING. I UNDERSTAND THAT I MAY HAVE THE RIGHT OT MAKE A WRITTEN REQUEST WITHIN A REASONABLE PERIOD OF TIME TO RECEIVE ADDITIONAL, DETAILED INFORMATION ABOUT THE NATURE AND SCOPE OF THIS INVESTIGATION.

The above information, to the best of my knowledge, is true and correct.

Signature of Applicant: Date Signed:

APPLICANT: PLEASE DO NOT WRITE BELOW

Desposit of \$ Received by (Name) This application form received by (Name):	Date: Date:				
Reference Verification Name	Reference Comments				