



**Autumn Management, LLC**  
 181 Northampton Street, P.O. Box 628, Easthampton, MA 01027  
 (413) 527-1580 Fax: (413) 527-5000  
 www.autumnmanagement.com  
 autumnrentals@gmail.com

For Office Use Only
Application Accepted
<input type="checkbox"/> Yes <input type="checkbox"/> No

**RENTAL APPLICATION**

DATE: \_\_\_\_\_ PROPERTY: \_\_\_\_\_ DESIRED MOVE-IN DATE: \_\_\_\_\_

**How did you hear about us? (Circle one)**

Yellow Page      Gazette      Craigslist      Autumn Website      Other: \_\_\_\_\_

<b>APPLICANT:</b> _____	<b>CO-APPLICANT:</b> _____
<b>D.O.B:</b> _____	<b>D.O.B:</b> _____
<b>S.S.N:</b> _____	<b>SSN:</b> _____
<b>PHONE:</b> _____	<b>PHONE:</b> _____
<b>EMAIL:</b> _____	<b>EMAIL:</b> _____

**HOUSING INFORMATION**

**APPLICANT PRESENT ADDRESS:** \_\_\_\_\_  
 STREET CITY STATE ZIP  
 DATES RENTED: FROM \_\_\_\_\_ TO \_\_\_\_\_ REASON FOR MOVING: \_\_\_\_\_

**LANDLORD'S INFORMATION:** \_\_\_\_\_  
 NAME ADDRESS PHONE/FAX  
 PREVIOUS ADDRESS: \_\_\_\_\_  
 STREET CITY STATE ZIP  
 DATES RENTED: FROM \_\_\_\_\_ TO \_\_\_\_\_ REASON FOR MOVING: \_\_\_\_\_

**LANDLORD'S INFORMATION:** \_\_\_\_\_  
 NAME ADDRESS PHONE/FAX  
**CO-APPLICANT PRESENT ADDRESS:** \_\_\_\_\_  
 STREET CITY STATE ZIP  
 DATES RENTED: FROM \_\_\_\_\_ TO \_\_\_\_\_ REASON FOR MOVING: \_\_\_\_\_

**LANDLORD'S INFORMATION:** \_\_\_\_\_  
 NAME ADDRESS PHONE/FAX  
 PREVIOUS ADDRESS: \_\_\_\_\_  
 STREET CITY STATE ZIP  
 DATES RENTED: FROM \_\_\_\_\_ TO \_\_\_\_\_ LANDLORD'S NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

**LANDLORD'S INFORMATION:** \_\_\_\_\_  
 NAME ADDRESS PHONE/FAX

**LIST ALL RESIDENTS WHO WILL OCCUPY THE APARTMENT:**

_____	_____
Name	Relationship
_____	_____
Name	Relationship
_____	_____
Name	Relationship
_____	_____
Name	Relationship

**VEHICLE INFORMATION:**

_____	_____	_____	_____	/	_____	_____	_____	_____
MAKE	MODEL	COLOR	PLATE		MAKE	MODEL	COLOR	PLATE

**APPLICANT CURRENT EMPLOYMENT:**

COMPANY: \_\_\_\_\_ POSITION: \_\_\_\_\_

SUPERVISOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

LENGTH OF EMPLOYMENT \_\_\_\_\_ (GROSS)SALARY/HOURLY\$ \_\_\_\_\_ #OF HOURS/WK \_\_\_\_\_

**PREVIOUS EMPLOYMENT (IF LESS THAN 6 MONTHS AT CURRENT POSITION)**

COMPANY: \_\_\_\_\_ POSITION: \_\_\_\_\_

SUPERVISOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

LENGTH OF EMPLOYMENT \_\_\_\_\_ (GROSS)SALARY/HOURLY\$ \_\_\_\_\_ #OF HOURS/WK \_\_\_\_\_

OTHER SOURCE OF INCOME: \_\_\_\_\_

**CO-APPLICANT CURRENT EMPLOYMENT:**

COMPANY: \_\_\_\_\_ POSITION: \_\_\_\_\_

SUPERVISOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

LENGTH OF EMPLOYMENT \_\_\_\_\_ (GROSS)SALARY/HOURLY\$ \_\_\_\_\_ #OF HOURS/WK \_\_\_\_\_

**PREVIOUS EMPLOYMENT (IF LESS THAN 6 MONTHS AT CURRENT POSITON)**

COMPANY: \_\_\_\_\_ POSITION: \_\_\_\_\_

SUPERVISOR: \_\_\_\_\_ PHONE: \_\_\_\_\_

LENGTH OF EMPLOYMENT \_\_\_\_\_ (GROSS)SALARY/HOURLY\$ \_\_\_\_\_ #OF HOURS/WK \_\_\_\_\_

OTHER SOURCE OF INCOME: \_\_\_\_\_

DO YOU OWN A PET?  Yes  No

IF SO, WHAT KIND: \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A FELONY?

Yes  No

HAVE YOU EVER BEEN EVICTED?

Yes  No

HAVE YOU EVER INTENTIONALLY REFUSED TO PAY RENT?

Yes  No

If yes, what were the circumstances?

A minimum gross income of at least 3 times the annual rent of the unit is required. You must provide current documentation for income verification. Acceptable documents include but are not limited to: monthly paystubs, 2 months bank statements if self-employed, student loan award letters, and benefit statements of other forms of income.

By signing this application, applicant(s) understand that Autumn Management will perform a credit and reference check to determine rental history and ability to pay the rental amount. The applicant(s) hereby authorizes the release of credit and above listed references to Autumn Management and other appropriate information for this purpose. All information thus gathered by Autumn Management will remain confidential.

I DECLARE THE FOREGOING INFORMATION TO BE TRUE UNDER PENALTY OF PERJURY.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-Applicant's Signature

\_\_\_\_\_  
Date

## Rules and Regulations

1. Pets of any kind are not allowed in or about the premises.
2. Motorcycles, vans, campers, or trucks are not allowed in the parking lot, except by written permission from the landlord in advance. No repair or maintenance work permitted on any vehicle on any Autumn Management property.
3. All vehicles must be registered and in working condition to be parked in the parking lot. Unregistered and disabled vehicles will be towed at the tenants' expense.
4. Trash only in the dumpster: no garbage. Large items are to be taken to the dump by the tenants, example: couch, chairs, and Christmas trees.
5. Bicycles are not allowed to be chained to fences or any other part of the property. All toys must be kept in the back yard.
6. Tenants are expected to keep outside of apartments clean and picked up. (Beer bottles, cigarettes, tires, etc.)
7. Clotheslines and Satellite dishes are not to be erected on the property.
8. Home businesses are not allowed to operate from any apartment.
9. There will be a \$20.00 fee for any return checks. Post-dated checks are not allowed.
10. If locked out of your apartment after hours it is the responsibility of the tenant to gain entrance through a private source such as a locksmith. The tenant is responsible for any cost incurred.
11. Vehicles are not allowed to park or drive on lawn for any reason including moving in or out.
12. Washing machines only allowed in apartments where the Landlord has provided hookups.
13. Public drinking of alcohol is not permitted.
14. Only authorized people are allowed to live in any of Autumn Management's properties. These people must be listed on this application and identification must be provided for all residents.
15. Any tenant(s) given permission to transfer to another apartment will be charged a minimum of \$350.00 for cleaning fees.
16. No objects are to be placed on or around the sprinklers.
17. There is no smoking inside any property owned by Autumn Management.
18. Air Conditioning units are not serviced by Autumn Management.
19. City Ordinance Section 410:482 Any occupant that disables, tampers with or destroys an operational smoke alarm or fire detection device after the City of Easthampton Fire Dept. has inspected and approved such smoke alarm or fire detection device shall be subject to a fine of up to \$100.00 Per Day.

I have read the above rules and understand that if the landlord determines a tenant is in breach of these rules a notice to vacate will be used to remove the tenant and all occupants from the apartment.

Signature \_\_\_\_\_ / \_\_\_\_\_ Date \_\_\_\_\_

**Everything that I have stated in this application is true and correct to the best of my knowledge. I understand that Autumn Management will retain this application whether or not it is approved. I authorize Autumn Management to 1.) verify all information contained in this application, 2.) to obtain a credit report and/or investigate report on myself and 3.) to verify that I have no criminal record. I understand that such information may be derived in whole or in part, from Experian or other major credit reporting companies. If my application is denied for delinquent credit, I am entitled to receive one free copy of my credit report from the company such information was obtained. Autumn Management will supply me with the information to obtain my free copy.**

A deposit received to secure an apartment will be deposited promptly and will not be refunded after three business days have elapsed. If payment is by check, refunds will not be issued until the payment has cleared.

Signature \_\_\_\_\_ / \_\_\_\_\_ Date \_\_\_\_\_

## PERMISSION FOR LANDLORD VERIFICATION

Applicant's Name: \_\_\_\_\_

BY SIGNING BELOW, I AUTHORIZE THE RELEASE OF INFORMATION FROM MY CURRENT OR PREVIOUS LANDLORDS, MORTGAGE HOLDERS OR RENTAL AGENTS AS LISTED ON MY APPLICATION, TO BE VERIFIED BY AUTUMN MANAGEMENT. The questions below are an example of questions we may ask during the landlord verification.

Applicant's Signature: \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*\*\***STOP!**\*\*\*\*\*

**Do not fill out the following. *FOR OFFICE USE ONLY.***

1. When did the applicant live at the property? \_\_\_\_\_
2. Did applicant have a lease? Yes No
3. Did applicant stay for the full term? Yes No Not Applicable
4. Did the applicant have roommates? Yes No
5. What was the applicant's monthly rent? \_\_\_\_\_ Did this include utilities? Yes No
6. Did the applicant pay his/her rent or mortgage on time? Yes No
7. Were eviction/foreclosure proceedings ever started against the applicant? Yes No
8. Are there any arrears at this time? Yes No
9. Did you ever receive complaints from neighbors regarding applicants behavior or have the police responded to the property due to complaints? Yes No  
  
If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
10. Any damages to the property? Yes No  
If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_
11. Any pets on the property? Yes No
12. Would you rent/loan to the applicant again? Yes No
13. Additional Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_