

# Colonial Gardens

P.O. Box 132, Tomkins Cove, NY 10986

(607) 343-2103 | management@colonialgardensowego.com | www.colonialgardensowego.com

## Rental Application

Separate application required from each applicant age 18 or older.

Full Name: \_\_\_\_\_

Home Phone: (    ) \_\_\_\_\_ Cell Phone (    ) \_\_\_\_\_

Email: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Driver's License Number: : \_\_\_\_\_ State: \_\_\_\_\_

Vehicle Year, Make & Model:

\_\_\_\_\_

Color: \_\_\_\_\_

License Plate Number: \_\_\_\_\_ State: \_\_\_\_\_

Have you ever rented from Robert Allegro before? Yes    No

If so, When and what Apt No.?

\_\_\_\_\_

### Additional Occupants

List everyone, including children, who will live with you:

1.) Full Name \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_ Date of Birth \_\_\_\_\_

2.) Full Name \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_ Date of Birth \_\_\_\_\_

3.) Full Name \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_ Date of Birth \_\_\_\_\_

4.) Full Name \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_ Date of Birth \_\_\_\_\_

**Rental History**

Current Address: \_\_\_\_\_

Monthly Rent: \$ \_\_\_\_\_ Dates Lived at Address: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Landlord/Manager: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Previous Address: \_\_\_\_\_

Monthly Rent: \$ \_\_\_\_\_ Dates Lived at Address: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Landlord/Manager: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Previous Address: \_\_\_\_\_

Monthly Rent: \$ \_\_\_\_\_ Dates Lived at Address: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Landlord/Manager: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

**Employment History**

Current Employer: \_\_\_\_\_

Position or Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ Supervisor's Phone: ( ) \_\_\_\_\_

Dates Employed at This Job: \_\_\_\_\_

Previous Employer: \_\_\_\_\_

Position or Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ Supervisor's Phone: ( ) \_\_\_\_\_

Dates Employed at This Job: \_\_\_\_\_

**Income**

1. Your gross monthly employment income (before deductions): \$ \_\_\_\_\_

2. Average monthly amounts of other income (specify sources): \$ \_\_\_\_\_

TOTAL: \$ \_\_\_\_\_

## Pets

If you have pets, please list them here AND fill out a Pet Approval Form. A maximum 3 pets are allowed per apartment/townhouse. A \$25 pet rent will be added to each pet, along with a separate security deposit.

1.) Pet Type: Small Dog | Large Dog | Cat | Other

Pet Name: \_\_\_\_\_

If Dog, Breed: \_\_\_\_\_ Shots [ ] yes [ ] no Tags [ ] yes [ ] no

Please provide a description of this pet: (details like potential adult weight & size, hair length, temperament, etc.)

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2.) Pet Type: Small Dog | Large Dog | Cat | Other

Pet Name: \_\_\_\_\_

If Dog, Breed: \_\_\_\_\_ Shots [ ] yes [ ] no Tags [ ] yes [ ] no

Please provide a description of this pet: (details like potential adult weight & size, hair length, temperament, etc.)

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3.) Pet Type: Small Dog | Large Dog | Cat | Other

Pet Name: \_\_\_\_\_

If Dog, Breed: \_\_\_\_\_ Shots [ ] yes [ ] no Tags [ ] yes [ ] no

Please provide a description of this pet: (details like potential adult weight & size, hair length, temperament, etc.)

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**Miscellaneous**

Any water filled furniture: [ ] No [ ] Water Bed [ ] Fish Tank  
[ ] Other: \_\_\_\_\_

Do you smoke? [ ] yes [ ] no

Have you ever:

Filed for bankruptcy? [ ] yes [ ] no

Been sued? [ ] yes [ ] no

Been evicted? [ ] yes [ ] no

Been convicted/plead guilty/no contest a felony/misdemeanor? [ ] yes [ ] no

Explain any "yes" listed above:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you currently on parole/probation? [ ] yes [ ] no

If yes, Name and Phone # of your P.O.:

\_\_\_\_\_

**Personal References**

Please do not use those related to you or landlords/employers listed above.  
Use professional references you have known for more than one year.

1.) Personal Reference: \_\_\_\_\_ Relationship: \_\_\_\_\_

Years known: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

2.) Personal Reference: \_\_\_\_\_ Relationship: \_\_\_\_\_

Years known: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

3.) Personal Reference: \_\_\_\_\_ Relationship: \_\_\_\_\_

Years known: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Emergency Contact Information

In case of emergency, Notify: \_\_\_\_\_

Relationship to you? \_\_\_\_\_ Phone #:( ) \_\_\_\_\_

In case of emergency, do you need special assistance? [ ] yes [ ] no

**Acknowledgement**

I certify that all the information given above is true and correct and understand that my lease or rental agreement may be terminated if I have made any false or incomplete statement in this application. I authorize verification of the information provided in this application from my credit sources, current and previous landlords and employers and personal references.

Date \_\_\_\_\_ Applicant \_\_\_\_\_