



PRIVATE HOME RENTAL

APPLICATION PROCESSING

Thank you for choosing Metropolis Property Management Group Inc. to assist you in finding your new apartment. Below is a description of the application process and the fees associated with them.

The Application for consideration must be filled out completely. Every question, box or space must have an answer, check mark or response.

TWO SEPARATE FEES ARE DUE AT THE TIME OF APPLICATION:

PAYMENT/CHECK #1:

Application Fee to reimburse management for the cost of Credit Check and Landlord History Report.

\$50.00 One Time Fee, Non-Refundable Per Adult Over 18

Payable to: Metropolis Property Management Group, Inc.

PAYMENT/CHECK #2: *Holding fee – Applied towards total amount due for Holding fee at lease signing*

\$500.00 Minimum, refundable (see Holding fee Agreement)

Payable to: LANDLORD – Exact Name to be provided by Leasing Agent

MONTHLY PET FEE – Subject to Landlord Approval

Per Cat: Additional \$35/month

Per Dog: Additional \$50/month

No applications will be processed without payment in accordance with above.

If you have any questions, please call 603.235-4180.

Each home is privately owned.

Anagnost Realty & Development and/or Metropolis is acting as a Leasing Agent Only and may not be managing the property. In most cases, management is handled by the Landlord directly. All Security Deposits will be held by the lessor directly and not the leasing agent.



1662 Elm Street, Manchester, New Hampshire 03101
 Office number: 603-666-4518 Fax Number: 603-644-3657
 Website: www.metropolispmg.com

Receiving Office Use Only	Date Received:
Property Manager Name:	
Property Address:	
Bedrooms:	
Pet Fees Required	
Agreed Rent Amount:	
Holding Fee Amount:	

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PLEASE PRINT. PLEASE ANSWER ALL QUESTIONS!

Do not leave any space or blanks write "NO or N/A" where appropriate

PART I - FAMILY COMPOSITION - To be completed by applicant

Directions to Applicant: Please complete the table below for each member of your household, whether or not those members are related. Include all members who you anticipate will live with you at least 50% of the time during the next 12 months. (A full time student is anyone who is enrolled for at least five calendar months for the number of hours or courses which are considered full-time attendance by that institution. The five calendar months need not be consecutive.)

Name <u>ALL</u> People to Occupy Unit LAST NAME FIRST MI	DOB	Age	Sex	Relationship	Social Security #
1.				HEAD	
2.					
3.					
4.					
5.					
6.					
7.					
8.					

Please provide all current contact information for all Household member (s) 18 years or older:

Current/Legal Address: _____

Email Address: _____

Cell Phone _____ Home phone _____

Current/Legal Address: _____

Email Address: _____

Cell Phone _____ Home phone _____

Current/Legal Address: _____

Email Address: _____

Cell Phone _____ Home phone _____

If any member of the household has used another name, please list this below (maiden name, former name, etc)

Former name used _____ Current name used _____

Former name used _____ Current name used _____

PART II - RENTAL HISTORY - To be completed by applicant

4. Residence History: Current & Previous Landlords:
(Past 2 years residence including any owned by applicants.)

Current Address		Rent/Month	Utilities/Month	Reason for Leaving	
Landlord Name	Landlord Address			Landlord Phone	
When did you move in: _____				When did you move out: _____	

Previous Address		Rent/Month	Utilities/Month	Reason for Leaving	
Landlord Name	Landlord Address			Landlord Phone	
When did you move in: _____				When did you move out: _____	

Previous Address _____		Rent/Month	Utilities/Month	Reason for Leaving	
Landlord Name	Landlord Address			Landlord Phone	

When did you move in: _____

When did you move out: _____

How did you hear about this housing opportunity?

5. Were you referred by a existing resident of one of our properties? YES NO

Referring Name: _____ **Referrer Address/Unit:** _____

Do we have permission to Thank them for the referral? YES NO

6. If No, then how did you learn about this available unit? Please Circle

Metropolis Website

Craigslist

Rent.com

Facebook

Trulia

Twitter

Zillow

Other _____

Drove By Property

The Way Home

Newspaper

Housing Authority - Please specify _____

Local Service Provider – Please Specify _____

7. Do you have any pets? YES NO

Pets:

Type:

How Many?

Breed:

Please Note:

Per Cat: One Time Registration Fee \$100, plus \$35/month

Per Dog: One Time Registration Fee \$300, plus \$50/month

The Registration Fee covers the cost of DNA Testing, Documentation, and other Pet Amenities which may be provided On the property.

PART V - EMPLOYMENT HISTORY - To be completed by applicant

7. Head's Current Employer:	
Date Hired:	Date terminated: Supervisor:
Salary: \$	Circle One: Annually Weekly Bi-Weekly Monthly
Employer Address:	
Address	City State Zip Phone #:

8. Head's Previous Employer:	
Date Hired:	Date terminated: Supervisor:
Salary: \$	Circle One: Annually Weekly Bi-Weekly Monthly
Employer Address:	
Address	City State Zip Phone #:

9. Spouse Current Employer:	
Date Hired:	Date terminated: Supervisor:
Salary: \$	Circle One: Annually Weekly Bi-Weekly Monthly
Employer Address:	
Address	City State Zip Phone #:

10. Other Applicant's Current Employer:	
Date Hired:	Date terminated: Supervisor:
Salary: \$	Circle One: Annually Weekly Bi-Weekly Monthly
Employer Address:	
Address	City State Zip Phone #:

PART VII - OTHER - To be completed by applicant

11. Do you have full custody of your child (ren)? Explain the custody arrangements:	Yes/ No
57. Would you or any members of your household benefit from a handicapped-accessible unit? If yes, explain:	Yes/No
12. Have you ever been evicted? If yes, explain:	Yes/ No
13. Have you filed for bankruptcy? If yes, explain:	Yes/No
14. Have you ever been convicted of a felony? If yes, explain:	Yes/No
15. Will your household be eligible or are you applying to receive Section 8 rental assistance in the next 12 Months? Explain:	Yes/No

PART IV - IN CASE OF EMERGENCY, NOTIFY: - To be completed by applicant

Name/ Relationship	Address	Phone

PART X - RESIDENT'S STATEMENT - To be completed by applicant

PLEASE READ THE FOLLOWING CAREFULLY

I do hereby certify that all the information provided in this housing application is complete and accurate to the best of my knowledge. Authorization is granted to verify the information in this application. I authorize any person, partnership, corporation, association, or governmental agency, possessing information on such matters to release such information to Metropolis Property Management Group, Inc., and I release and save harmless the respective respondent. I understand that a wage and benefit check may be made through the Department of Labor, Licensing and Regulation, and that a criminal background check may be conducted. Authorization is also granted to check with federally assisted housing agencies to determine if any debt is owed.

I/We understand that I/We must pay a holding fees prior to occupancy. I/We understand that Holding fee placed to place a hold on any unit are Nonrefundable after 48 Hours of Receipt. I/We understand that this application in no way ensures occupancy and that my/our application can be rejected based on, but not limited to poor credit or personal references, police record indicating unacceptable or criminal behavior (ie: Felonies, Sexual Offenders, drug charges), or poor personal interview. If my application is denied, I/We understand that our holding fee will be refunded in full by Metropolis Property Management Group Inc, Inc. I/We acknowledge that Application to this property requires full disclosure of all income, employment, and assets to include, but not limited to Tax Fillings, Pay check stubs, and Account Statement. Failure to provide the necessary information upon request will result in forfeiture of any Holding fee.

I/We hereby certify that I/We do not and will not maintain a separate, subsidized rental unit in another location. I/We understand that I/We must pay a holding fee prior to occupancy. I/We certify that the housing I/We will occupy is/will be my/our permanent residence. I/We understand that eligibility for housing will be based on either the Rural Economics or Community Development Agency or the Department of Housing and Urban Development's eligibility criteria. I/We certify that the information given in this application is true to the best of my/our knowledge. I/We understand that any false information is punishable by law and could be grounds for cancellation of this application or termination of residency after occupancy.

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SIGNATURE OF ALL PARTIES TO THIS APPLICATION, 18 YEARS OR OLDER:

Applicant Signature (Head)

Date

Applicant Signature (Co-Head)

Date

Other Applicant Signature (Over 18 years of Age)

Date

Other Applicant Signature (Over 18 years of Age)

Date

Did anyone help and assist you in filling out this application?	Yes/No
Signature	Date
Signature of person who assisted with application and their relationship to applicant	Date
Reason for the assistance:	