

# NEW HAMPSHIRE RENTAL APPLICATION

DATE: \_\_\_\_\_

Non-refundable processing fee: \$ \_\_\_\_\_ /per adult  
Please Print Clearly And Legibly

**APPLICANT NAME:** \_\_\_\_\_ PHONE: \_\_\_\_\_

SS#: \_\_\_\_\_ DOB: \_\_\_\_\_ EMAIL: \_\_\_\_\_

APPLICANT DRIVERS LIC#: \_\_\_\_\_

## **APPLICANT RENTAL HISTORY**

**CURRENT ADDRESS:** \_\_\_\_\_ CITY, STATE, ZIP: \_\_\_\_\_

RENT: \$ \_\_\_\_\_ DATES OF OCCUPANCY: \_\_\_\_\_

LANDLORD NAME/PHONE: \_\_\_\_\_ REASON FOR MOVING: \_\_\_\_\_

**PREVIOUS ADDRESS:** \_\_\_\_\_ CITY, STATE, ZIP: \_\_\_\_\_

RENT: \$ \_\_\_\_\_ DATES OF OCCUPANCY: \_\_\_\_\_

LANDLORD NAME/PHONE: \_\_\_\_\_ REASON FOR MOVING: \_\_\_\_\_

## **APPLICANT EMPLOYMENT HISTORY**

**CURRENT EMPLOYER & ADDRESS:** \_\_\_\_\_ DATE OF HIRE: \_\_\_\_\_

POSITION: \_\_\_\_\_ PAY PER HR & HOURS PER WK: \_\_\_\_\_

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

**PREVIOUS EMPLOYER & ADDRESS:** \_\_\_\_\_ EMPLOYMENT DATES: \_\_\_\_\_

POSITION: \_\_\_\_\_ PAY PER HR & HOURS PER WK: \_\_\_\_\_

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

**CO-APPLICANT NAME:** \_\_\_\_\_ PHONE: \_\_\_\_\_

SS#: \_\_\_\_\_ DOB: \_\_\_\_\_ EMAIL: \_\_\_\_\_

CO-APPLICANT DRIVERS LIC#: \_\_\_\_\_

## **CO-APPLICANT RENTAL HISTORY**

**CURRENT ADDRESS:** \_\_\_\_\_ CITY, STATE, ZIP: \_\_\_\_\_

RENT: \$ \_\_\_\_\_ DATES OF OCCUPANCY: \_\_\_\_\_

LANDLORD NAME/PHONE: \_\_\_\_\_ REASON FOR MOVING: \_\_\_\_\_

**PREVIOUS ADDRESS:** \_\_\_\_\_ CITY, STATE, ZIP: \_\_\_\_\_

RENT: \$ \_\_\_\_\_ DATES OF OCCUPANCY: \_\_\_\_\_

LANDLORD NAME/PHONE: \_\_\_\_\_ REASON FOR MOVING: \_\_\_\_\_

## **CO-APPLICANT EMPLOYMENT HISTORY**

**CURRENT EMPLOYER & ADDRESS:** \_\_\_\_\_ DATE OF HIRE: \_\_\_\_\_

POSITION: \_\_\_\_\_ PAY PER HR & HOURS PER WK: \_\_\_\_\_

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

**PREVIOUS EMPLOYER & ADDRESS:** \_\_\_\_\_ EMPLOYMENT DATES: \_\_\_\_\_

POSITION: \_\_\_\_\_ PAY PER HR & HOURS PER WK: \_\_\_\_\_

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

Pursuant to the Fair Housing laws of the State of New Hampshire, the management shall neither refuse to rent or lease an apartment or house to any person because of race, color, religion, national origin or ancestry of applicant, nor discriminate in the terms offered or the services rendered. The undersigned applicant(s) hereby authorize(s) the Landlord and any consumer reporting agency or bureau to make a consumer or credit report in connection therewith. This additionally authorizes the Landlord to verify any information provided on the application. The rental agent is an independent contractor and has no authority to make any representations concerning the premises. The rental agent is only authorized to show the unit for rent. The final decision making will be the responsibility of the owner of the property.

- RENTAL UNIT ADDRESS: \_\_\_\_\_ DESIRED MOVE-IN DATE: \_\_\_\_\_
- NAME, AGE AND RELATIONSHIP OF **ALL OTHERS** WHO WILL OCCUPY UNIT: \_\_\_\_\_  
\_\_\_\_\_
- NAME, ADDRESS & PHONE OF EMERGENCY CONTACT: \_\_\_\_\_  
\_\_\_\_\_
- PET(S) DESCRIPTION (if applicable): \_\_\_\_\_
- MAKE/MODEL/COLOR/PLATE# OF **ALL VEHICLES** TO BE PARKED AT PREMISES: \_\_\_\_\_  
\_\_\_\_\_

APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Have you ever been convicted of a felony? \_\_\_\_\_

If yes, explain: \_\_\_\_\_

Have you ever been evicted? \_\_\_\_\_

If yes, explain: \_\_\_\_\_

CO-APPLICANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Have you ever been convicted of a felony? \_\_\_\_\_

If yes, explain: \_\_\_\_\_

Have you ever been evicted? \_\_\_\_\_

If yes, explain: \_\_\_\_\_

Do not write below this line

Fee Received: \_\_\_\_\_

Form of payment: CASH/CHECK/ON-LINE

\_\_\_\_\_  
SIGNATURE OF AGENT DATE