



Date: _____

FIRST ON LEASE

PERSONAL INFORMATION

Full Name: _____
 Phone: (____) _____
 Date of Birth: _____
 License No.: _____
 Social Security No.: _____ - _____ - _____

RESIDENCE HISTORY

PRESENT ADDRESS

Address: _____
 City _____ ST _____ Zip _____
 Month & Year Moved In: _____
 Landlord: _____
 Phone: (____) _____ Rent: \$ _____

PREVIOUS ADDRESS

Address: _____
 City _____ ST _____ Zip _____
 Month & Year Moved In: _____
 Landlord: _____
 Phone: (____) _____ Rent: \$ _____

EMPLOYMENT INFORMATION

Employer: _____
 Address: _____
 City _____ ST _____ Zip _____
 Phone: (____) _____
 Position: _____ Income: \$ _____
 Other Sources of Income: _____
 Amount: \$ _____
 Name of Contact: _____
 Phone: (____) _____

VEHICLE INFORMATION

Make/Model: _____
 Year: _____ Color: _____
 Lic. Plate No. _____ ST _____

SECOND ON LEASE

Full Name: _____
 Phone: (____) _____
 Date of Birth: _____
 License No.: _____
 Social Security No.: _____ - _____ - _____

PRESENT ADDRESS

Address: _____
 City _____ ST _____ Zip _____
 Month & Year Moved In: _____
 Landlord: _____
 Phone: (____) _____ Rent: \$ _____

PREVIOUS ADDRESS

Address: _____
 City _____ ST _____ Zip _____
 Month & Year Moved In: _____
 Landlord: _____
 Phone: (____) _____ Rent: \$ _____

Employer: _____
 Address: _____
 City _____ ST _____ Zip _____
 Phone: (____) _____
 Position: _____ Income: \$ _____
 Other Sources of Income: _____
 Amount: \$ _____
 Name of Contact: _____
 Phone: (____) _____

Make/Model: _____
 Year: _____ Color: _____
 Lic. Plate No. _____ ST _____

Names of Other Residents: Relationship

PETS (Number and Breed)

Financial Information:
 Bank Name: _____ Account #: _____

PLEASE READ CAREFULLY BEFORE SIGNING

It is important that the information be accurate and complete, Management will rely heavily on the information which you have supplied. This form is only an application for residence and that the submission of this application does not reserve, nor in anyway, guarantee a unit. By signing this application you represent and warrant the accuracy of this information and you authorize Management to verify references that you have listed. Signature on this application gives Management permission to run a credit report and verify your credit history. You agree and understand your application fee of \$35.00 is non-refundable if you choose for any reason not to move into this apartment community. Please make check payable to **CDP Springs LLC**. If Management rejects your application for any reason, your application fee will be refunded in full. You also agree that Management has the authority to notify National Grid, Wilton Water & Sewer Authority, and any other utility provider to put the utility meter in your name on the first day of your lease.

Signed Applicant _____ **Signed Co-Applciant** _____
Date: _____ **Date:** _____

FOR OFFICE USE ONLY

Apartment #: _____

Rental Amount: \$ _____

Move-in Date: _____

Security Amount: \$ _____

Lease Term Dates From _____

Pet Fee: \$ _____

To _____

Other Information: _____

REFERENCE VERIFICATION

Credit: _____

Employment: _____

Present Landlord: _____

Other: _____

This Application is _____ **Approved**
_____ **Not Approved** **By:** _____