## **The Frizlen Group Property Management**



Property Management Main Office: 257 Lafayette Avenue, Suite 102, Buffalo, NY 14213

OFFICE: 716.381-9838 FAX: 716.881-5110 Email: jason@FrizlenGroup.com Skylr@FrizlenGroup.com

	nent # Interested In:						
Basic Information:							
Full Name :			one: ( )				
		Social Se	•				
Email Address:	Other Phone: ( )  Dependents:						
Co-Applicant Name							
List All Pets:			Social Security #:				
Decidential History /La	at 2 Vacuals						
Residential History (La	st 3 Years):	A 177	0.1				
Current Address:	7:	Apt#	City ar Moved In				
State	Zip	Month/Ye	ar Moved in	D4- A	/ th-		
Reasons for Leaving:			Dhana: /	Rent: \$	/mth		
Owner/Agent:	3 ((0.075)		Phone: (	Dont: C	Inath		
Previous Address )last	o years)		Di/	Rent: \$	/mth		
Owner/Agent:			Phone: (	)			
Credit History:							
-	kruptcy in the past seven (7) years?		Yes	No	)		
	icted from a rental residence?		Yes	No			
	ore late rental payments in the past year?	í.	Yes	No			
	or intentionally refused to pay rent when c		Yes	No			
Employment Information	· ·						
Your Status:	Full Time Part Time		Student	Un	employed		
Employer:							
Date Employed:		Employed	as:				
Phone ( )			Annual Income				
If less than 12 months I	ast Employer:	Phone (	)	Annual Incon	ne		
Date Employed:		Employed	l as:				
etc.) who we may contact want us to consider it in	s of income that you would like us to conset for confirmation. You do not have to rethis application.  Source/Contact Name	veal alimon	y, child support, or sp	ouse's annua	al income unless you		
			1 Heric () _				
Your References:							
Bank Accounts:							
Name		Type of Account		Account Number			
Name		Type of Account		Account Number			
Driver's License #:	State of Issue:		Expiration Date:				
Personal References							
Name	Address		Phone (	)			
APPLICANT: PLEASE I	OO NOT WRITE BELOW (FOR OFFICE I	JSE ONLY	)				
Deposit of \$	· ·						
Received by							

## Important: \*\*\*Please include past two paystubs or for new jobs job offer sheet for potential tenant(s)\*\*\*

Vehicle Information	n:			
Make/Model:		Year	Color	
License Plate # & St	tate			
Please give any ad	ditional information that ı	might help owner/mana	agement evaluate this application	ı:
-				
References:				
Personal:	1.) Name		Number	
	2.) Name		Number	
Professional:	1.) Name		Number	
			Number	
Where may we read	ch you to discuss this app			
	-			
	Rental Amount \$_			
	325.00 and is non-refundab			
days. Upon accepta When so approved a balance of the secur if occupancy occurs be refunded, the appreject. I recognize the whereby information	nce, this deposit shall be re and accepted, I agree to ex rity deposit and 1 <sup>st</sup> month's before the 1 <sup>st</sup> of the month plication hereby waiving any act as a part of your proced	etained as part of the sec ecute a lease for rent prior to the move in . If the application is not y claim for damages by r ure for processing my ap nal interviews with others	e if this application is not accepted in curity deposit and this amount is normonths and before possed date. A partial month rent in a prorapproved or accepted by the owner reason of non-acceptance which the oplication, an investigative consumes with whom I may be acquainted. Testics and mode of lining.	n-refundable otherwise. ssion is given to pay the rated amount shall be due r or agent, the deposit will e owner or agent may er report may be prepared
The above informati	on, to the best of my knowle	edge, is true and correct	t.	
Signature			Date	_
	investigation of my credit, t vith this owner/manager.	AUTHORIZAT Release of Information and history, banking and the state of the state o		renting an apartment or
Print Name				
Signature			Date	

