

Bessette Realty
226 Massachusetts Avenue
Arlington MA 02474
Phone: (781) 643-5433
Fax 339-204-9589

Joanne Lyttle
hjlyttl1@aol.com
Loretta Mosca
lobesette@aol.com

APPLICATION FOR APARTMENT

NAME _____ DATE _____

STREET _____ CITY _____ STATE _____ ZIP _____

H-PHONE _____ W-PHONE _____

CELL PHONE _____ E-MAIL _____

EMPLOYED BY _____ HOW LONG? _____ SALARY _____

SUPERVISOR _____ SUPERVISOR'S W-PHONE _____

PRESENT LANDLORD _____ PHONE _____

TERM THERE _____ RENT PAID _____

PREVIOUS LANDLORD _____ PHONE _____

PREVIOUS ADDRESS _____ TERM THERE _____

BANK NAME _____ CHECKING # _____

YEAR, MODEL, COLOR, PLATE# OF CAR _____

PETS: Complete Description, including age and whether or not neutered.

DATE TO OCCUPY _____ NUMBER TO OCCUPY _____

CHILDREN'S NAMES _____

PERSON TO NOTIFY IN CASE OF EMERGENCY _____

TELEPHONE NUMBER _____

PREMISES APPLIED FOR _____

LANDLORD'S NAME _____

RENTAL AMOUNT _____ INCLUDES: Heat Hot Water Electric (circle)

REMARKS _____

Bessette Realty has accepted a good faith deposit on behalf of the landlord. Deposit shall be refunded if the landlord denies the application. Bessette Realty does not rate credit or references, it merely relays to the landlord the current status reported to us. Final approval of all applications is at the sole discretion landlord. Once the application is accepted, the deposit shall become non-refundable and the tenant agrees to enter into a rental agreement within 3 business days.

Applicant's signature

Date