

App: _____
Proof of Income: _____

Wade Tower and Garden Apartments
10 Queens Drive, Suite 101
Schenectady, NY 12304
(P) 518-346-5536 (F) 518-346-0022
wadetowers@gmail.com
<https://www.wadetowerandgardens.com/>

OFFICE USE ONLY:

Decision Result: _____
Apartment Number: _____
Move In Date: _____
Security Deposit Paid: _____
First Month Paid: _____
Last Month Paid: _____

Today's date: _____

OFFICE USE ONLY:

TOWER GARDEN

Anticipated Lease Beginning: _____

Landlord: _____

Interested In:

____ Choice Apt # _____ Rent _____ per month Utilities Inc. _____ APPROVED
____ Choice Apt # _____ Rent _____ per month Utilities Inc. _____ APPROVED

PRIMARY APPLICANT INFORMATION

Full Name: _____

Social Security # _____

Current Address: _____

Driver's License # _____

Birth Date: _____

Cell Phone #: _____

Email: _____

Checking Bank Name: _____

Savings Bank Name: _____

Please Provide The Last Landlord's Information:

Landlord Name: _____

Phone # _____

Apt # _____ Occupancy Dates From _____ To _____

Monthly Rent Amount: _____

Please Provide Income Information

Employed Retired Amount Of Income: \$ _____ per _____

Source of Income:
Employment Social Security Pension Other Source

Employer Name: _____

Work Phone #: _____

Address: _____

Supervisors Name: _____

Position: _____

Employed From: _____

Salary: \$ _____ per _____

Please Provide Vehicle Information:

How many vehicles do you have? _____ Monthly Obligation \$ _____

Are you the registered person on the vehicle(s)? _____ If no, please explain:

Year: _____ Make: _____ Model: _____ Color: _____ License: _____
Year: _____ Make: _____ Model: _____ Color: _____ License: _____

Additional Occupants (Not including Co-Applicant(s)):

Names: _____ Relationship: _____ Age: _____

Please Provide The Following Pet Information (If Applicable):

Our properties only allow cats. Will you be bringing any with you? _____ If yes, please ask the Property Manager about our policy on cats.

Please Provide The Following Additional Information:

1. Have you ever been evicted from an apartment in the last 5 years? _____ If yes, please explain _____

2. Have you ever been served an eviction notice or been asked to vacate the property on which you were renting? _____ If yes, please explain _____

3. Have you ever refused to pay rent when rent was due? _____ If yes, please explain _____

4. Have you ever broken or in any manner failed to honor a lease or rental agreement? _____ If yes, please explain _____

5. Have you ever been sued for non-payment of a debt? _____ If yes, please explain _____

6. Have you ever filed bankruptcy? _____ If yes, what year and State _____
7. Have you ever been convicted of a felony or spent time in jail? _____ If yes, please explain _____

8. Have you ever changed you name or gone under an assumed name? _____ If yes, please state names and explain _____

9. How did you hear about us? _____

SECOND APPLICANT/CO-APPLICANT INFORMATION

Full Name: _____ Social Security # _____
Current Address: _____ Driver's License # _____
_____ Birth Date: _____
Cell Phone #: _____ Email: _____
Checking Bank Name: _____ Savings Bank Name: _____

Please Provide The Last Landlord's Information:

Landlord Name: _____ Phone # _____
Apt # _____ Occupancy Dates From _____ To _____ Monthly Rent Amount: _____

Please Provide Income Information:

Employed Retired Amount Of Income: \$_____per_____
Source Of Income:
Employment Social Security Pension Other Source

Employer Name: _____ Work Phone #: _____
Address: _____ Supervisors Name _____
_____ Position _____
Employed From: _____ Salary: \$_____per_____

Please Provide Vehicle Information

How many vehicles do you have? _____ Monthly Obligation \$ _____
Are you the registered person on the vehicle(s)? ____ If no, please explain:

Year: _____ Make: _____ Model: _____ Color: _____ License: _____
Year: _____ Make: _____ Model: _____ Color: _____ License: _____

Please Provide The Following Additional Information:

1. Have you ever been evicted from an apartment in the last 5 years? ____ If yes, please explain _____

2. Have you ever been served an eviction notice or been asked to vacate the property on which you were renting? ____ If yes, please explain _____

3. Have you ever refused to pay rent when rent was due? ____ If yes, please explain _____

4. Have you ever broken or in any manner failed to honor a lease or rental agreement? ____ If yes, please explain _____

5. Have you ever been sued for non-payment of a debt? ____ If yes, please explain _____

6. Have you ever filed bankruptcy? ____ If yes, what year and State _____

7. Have you ever been convicted of a felony or spent time in jail? ____ If yes, please explain _____

8. Have you ever changed you name or gone under an assumed name? ____ If yes, please state names and explain _____

Please Read The Following:

I, Applicant and Co-Applicant(s) have examined the information I have provided on this application and hereby agree that all are true and to the best of my knowledge.

I understand and agree that this application is subject to approval by Wade Towers, LLC based primarily on the information I have given herein.

I hereby waive any claim for damages if my Application is not accepted. I understand any deposit given at time of application will be forfeited should I be declined residency or should I choose to cancel an approved application after paying an initial deposit.

I understand Wade Towers, LLC will make good faith effort to have the premises ready for occupancy as reserved. However, should the premises not be available for occupancy at the time stated, I hereby waive any and all rights to seek to recover damages of any kind from Wade Towers, LLC.

I hereby authorize Wade Towers, LLC., Inc. to obtain any information necessary to verify accuracy of the information I have provided Wade Towers, LLC. can call or write any and all of the references, landlords, jobs, and any other credit reports to verify statements I have given are true and accurate.

I understand that insurance coverage is required by Lease:

“Tenant will be required to carry general liability insurance on the apartment also naming landlord as ‘Additional Insured’ to cover all liability as the result of negligence caused by tenant and/or affiliates.”

Applicant Signature _____ Date _____

Co-Applicant Signature _____ Date _____

Property Manager Signature _____ Date _____

FOR OFFICE USE ONLY:

COMMENTS:
