

Appleton Square, LLC Apartment Application

Please complete and fax to 978-681-6430.
Application process is not complete until original of this form, a \$45 (non-refundable) application fee and a \$600 application deposit are received.

Applicant I:

Name	
Date of Birth	
SS Number	
Street Address	
City, State & Zip	
Home Phone	
Work/Cell Phone	
E-mail	

Employer Name, Address and Telephone:

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Occupation & Length of Employment:

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Supervisor, Annual Salary & Supervisor Telephone Number:

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Bank Name, Account Type & Account Number:

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Applicant II:

Name	
Date of Birth	
SS Number	

Street Address	
City, State & Zip	
Home Phone	
Work/Cell Phone	
E-mail	

Employer Name, Address and Telephone:

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Occupation & Length of Employment:

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Supervisor, Annual Salary & Supervisor Telephone Number:

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Bank Name, Account Type & Account Number:

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Please complete if there will be additional occupants of the apartment:

Name, Age, SS # and Relation to Applicant	
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Name, Age, SS # and Relation to Applicant	

I/We hereby authorize management to verify all references and credit records.

Applicant Signature: _____ Date: _____

Applicant Signature: _____ Date: _____