Falcon Trace Active Adult Living, LLC. 1 Sparrowhawk Circle Halfmoon, NY 12065 518-664-5464

Unit applied for:	Move in date:	Rent a	_ Rent amount: \$	
How many people will be residing full or part time? Adults: Childre				
Applicant Information				
First Name:	MI: Last N	lame:		Suf:
SSN: I	Date of Birth:	Phone:		
Address:	City:	State:	Zip:	
Email:				
Employer:	Employer's #	# :		
How long at present job?	?Income:		_	
Landlord Phone #:				
Co-Applicant Informat	i <u>on</u>			
First Name:	MI: Last N	lame:		Suf:
SSN: [Date of Birth:	Phone:		
Address:	City:	State:	Zip:	
Email:				
Employer:	Employer's i	‡ :		
How long at present job?) Income:	Land	lord Phone	. #•

1. Make/Model:	Year:	License Plate:
2. Make/Model:	Year:	License Plate:
Are either of these vehicles a commerci	al vehicle? Yes _	No
Pet Information		
Do you have animals? If yes, h	low many?	
If yes, what species? Is you	ur animal(s) an I	ESA/Service animal?
Staff Initial:		
Emergency Contacts Emergency contacts cannot be your co-apple	icant/unit resid	ent
Applicant Emergency Contact:	Pł	1:
Co-Applicant: Emergency Contact:		_ Ph:
Tenants not on lease If you have children, or any other person we list their information below:	ho will be residi	ing in your unit full time, please
Name: Relationship:		Age:
Name: Relationship:	<i>.</i>	Age:
Name: Relationship:		Age:
Have you ever:		
Filed for bankruptcy? Yes No	If yes, when? _	
Been served an eviction notice or been ask	ed to vacate a pr	roperty? Yes No
Willfully or intentionally refused to pay rer	nt when due? Yes	s No

Vehicle Information

<u>Personal References</u>

	1. Name:	Relationship:	Ph:			
	2. Name:	Relationship:	Ph:			
	3. Name:	Relationship:	Ph:			
•	Please read t	<u>he following carefully b</u>	oefore signing.			
1.	I hereby apply to lease an apartment for the term and upon the conditions set forth. I agree that the rent is payable the first day of each month in advance. As an inducement to the owner of the property and to the agent to accept this application I warrant that all statements set forth are true.					
2.	I (we) understand the \$300 deposit to hold the apartment is NON-REFUNDABLE after three (3) business days from the date the deposit was received.					
3.	When the application before possession of lease. If the application agreement for the performance of the performance of the Active Active Active Active Active of the application of the	the unit is given and to pay the security of the unit is given and to pay the security of the is approved and accepted, and I refused riod called for in the application, the sum adult Living as liquidated damages. This and I dult Living to accept this application for cant remain with the sole discretion of the in the apartment prior to taking occupants.	deposit in full upon signing the eto enter into a lease received shall be retained by agreement shall in no way bind tenancy as the acceptance or the owner. I also agree to have			
4.	consumer credit repo	ntact any references that I have listed. I alort from your credit reporting agency and ure to verify the truth and accuracy of an	d periodically re-run this check			
5.	I authorize the verifice employment and back agreement when app be rejected, and any s	cation of the information provided on this kground. I acknowledge this application roved. If any information is found to be insubsequent rental agreement becomes vorticient reason for immediate eviction an	will become part of the lease ncorrect, the application will oid. False and misleading			
Applie	cant		Date			
Co-Ap	plicant		Date			