

SAYVAH PROPERTIES, LLC
GILLETTE TOWERS
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RENTAL APPLICATION

PLEASE PRINT

UNIT REQUESTED: _____ RENT: _____ DESIRED MOVE IN DATE: _____

FULL NAME: _____ D.O.B. _____

MOBILE #: _____ EMAIL ADDRESS: _____

SOCIAL SECURITY #: _____ DRIVERS LICENSE #: _____

HOW DID YOU HEAR ABOUT US? _____

CURRENT ADDRESS: _____ CITY/ZIP: _____

CURRENT LANDLORD: _____ LANDLORD CONTACT #: _____

CURRENT MONTHLY RENT/MORTGAGE: _____ HOW LONG: _____

REASON FOR LEAVING: _____

PETS ☐ Y ☐ N TYPE/BREED: _____ WEIGHT: _____

PARKING INFORMATION:

MAKE/MODEL/YEAR: _____

COLOR: _____ PLATE #: _____

CURRENT EMPLOYER:

POSITION: _____ START DATE: _____

ADDRESS: _____ CITY/ZIP: _____

YEARLY SALARY: _____ ADDITIONAL INCOME: _____

SUPERVISOR: _____ CONTACT #: _____

IF RETIRED:

SS/PENSION/RETIREMENT INCOME: _____

ADDITIONAL INCOME: _____ SAVINGS: _____

EMERGENCY CONTACT NAME:

CONTACT PERSON: _____ CONTACT #: _____

ADDRESS: _____ CITY/ZIP: _____

PLEASE CIRCLE THE FOLLOWING:

Do you need to sell your home before renting: Y / N

Have you ever been served a late rent notice: Y / N

Have you ever been served an eviction notice? If so, when? Y / N

Have you ever been convicted of a misdemeanor or felony? Y / N

If yes, please explain why: _____

Have you ever been a party to a lawsuit in the past? Y / N

If yes, please explain why: _____

Have you ever filed for bankruptcy? Y / N

If so, when? _____

Do you smoke? Y / N

PLEASE ANSWER THE FOLLOWING:

How long do you think you will be renting from us? _____

Have you had any recurring problems with your current apartment or landlord? If yes, please explain. _____

As we consider your application, do you have any other assets that would help in determining your application? _____

SIGNATURE: _____ **DATE:** _____