

Francoeur Realty Trust & FFF Holdings, LLC
17 Park View Terrace, Somersworth, NH 03878
Email: wendy@allrealestatenh.com Phone: 603-749-7100

RENTAL APPLICATION

***ADDRESS YOU ARE APPLYING FOR:** _____

APPLICANT #1:

First Name _____ Last Name _____

SSN: _____ DOB: _____ Email Address: _____

Cell Phone: _____ DO YOU HAVE ANY PETS? _____

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**APPLICANT #2:**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

SSN: \_\_\_\_\_ DOB: \_\_\_\_\_ Email Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

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Additional Occupants:

• First Name _____ Last Name _____

DOB: _____ SSN: _____ Relationship _____

• First Name _____ Last Name _____

DOB: _____ SSN: _____ Relationship _____

• First Name _____ Last Name _____

DOB: _____ SSN: _____ Relationship _____

Background:

• Has any applicant ever been evicted or asked to leave a rental unit? Y / N

• Has any applicant had or has a judgment against you for back rent or property damage? Y / N

• Has any applicant ever been convicted of a crime? Y / N

If answered "Yes" to any questions, please explain:

RESIDENCE HISTORY: Applicant #1:

~Current Address: _____ City _____ State _____ Zip _____
Dates at this address: _____ to _____ Own or Rent Rent/Mortgage Amount: _____
Name of Present Landlord/Mortgage Holder: _____ Phone: _____
Reason for Moving: _____

~Previous Address: _____ City _____ State _____ Zip _____
Dates at this address: _____ to _____ Own or Rent Rent/Mortgage Amount: _____
Name of Landlord/Mortgage Holder: _____ Phone: _____
Reason for Moving: _____

RESIDENCE HISTORY: Applicant #2:

~Current Address: _____ City _____ State _____ Zip _____
Dates at this address: _____ to _____ Own or Rent Rent/Mortgage Amount: _____
Name of Present Landlord/Mortgage Holder: _____ Phone: _____
Reason for Moving: _____

~Previous Address: _____ City _____ State _____ Zip _____
Dates at this address: _____ to _____ Own or Rent Rent/Mortgage Amount: _____
Name of Landlord/Mortgage Holder: _____ Phone: _____
Reason for Moving: _____

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**INCOME: Applicant #1:**

Current Employer: \_\_\_\_\_ How Long? \_\_\_\_\_  
Address: \_\_\_\_\_ Phone#: \_\_\_\_\_  
Gross Monthly Income: \_\_\_\_\_ Other Income: \_\_\_\_\_

**INCOME: Applicant #2:**

Current Employer: \_\_\_\_\_ How Long? \_\_\_\_\_  
Address: \_\_\_\_\_ Phone#: \_\_\_\_\_  
Gross Monthly Income: \_\_\_\_\_ Other Income: \_\_\_\_\_

**VEHICLES:**

~Car #1 Year/Make/Model: \_\_\_\_\_ Color \_\_\_\_\_

Plate #: \_\_\_\_\_

~Car #2 Year/Make/Model: \_\_\_\_\_ Color \_\_\_\_\_

Plate #: \_\_\_\_\_

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EMERGENCY CONTACT: Applicant #1: (not living with you)

First Name _____ Last Name _____

Phone _____ Relationship _____

EMERGENCY CONTACT: Applicant #2: (not living with you)

First Name _____ Last Name _____

Phone _____ Relationship _____

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Thank you for completing an application to rent from Francoeur Realty Trust or FFF Holdings, LLC. Please note that a completed application requires submission of the following, which will be copied an attached to this application.

- |       |       |                                                                     |
|-------|-------|---------------------------------------------------------------------|
| 1     | 2     |                                                                     |
| _____ | _____ | Valid Driver’s License or Non-Driver ID (from all adult occupants). |
| _____ | _____ | Two weeks of most current pay stubs.                                |



Pursuant to Fair Housing Laws, management shall not refuse to rent or lease an apartment to any personal based on race, color, creed, religion, national origin, ancestry, disabilities or familial status of the applicant(s) nor discriminate in the terms offered or services rendered.

A fee of \$50.00 is charged on all rental applications for the purpose of holding a unit until information on this application can be verified. The application fee is only refundable if Applicant(s) do not meet the minimal criteria and is not selected as the first qualified Applicant(s). Should the Applicant(s) be approved, the \$50.00 will be applied to the first month’s rent. Applicant (s) acknowledge that the application will become part of the lease agreement when approved. If any information is found to be incorrect, the application will be rejected, and any subsequent rental agreement becomes void.

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_