

*Alpha Management Corporation  
7 Oak Hill Terrace  
P.O. Box 310  
Scarborough, ME 04074  
883-5505 office  
883-6779 fax*

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## INSTRUCTIONS

PLEASE READ CAREFULLY. INCOMPLETED APPLICATIONS WILL NOT BE ACCEPTED. A NON-REFUNDABLE \$35.00 APPLICATION FEE PER PERSON OVER THE AGE OF 18 MUST BE INCLUDED BEFORE APPLICATION WILL BE ACCEPTED.

1. COMPLETE ALL AREAS: If an item does not apply to you, answer "NO" on that question or mark with a "0" if it is a dollar amount line or section.

a) All sources of earned income must be reported for all household members 18 years and older.

2. SIGNATURES: Required by all adult applicants (18 and older)

3. COPIES OF SOCIAL SECURITY CARDS, DRIVERS LICENSES, OR OTHER PHOTO I.D.S' are required for everyone on the application.

4. RETURN YOUR APPLICATION WITH A \$35.00 APPLICATION FEE PER PERSON TO:

Alpha Management Corp.

7 Oak Hill Terrace

P.O. Box 310

Scarborough, ME 04074

### **NOTE: ALPHA MANAGEMENT DOES NOT ALLOW DOGS**

Please check with Alpha Management for our complete pet policy.

\* One bedroom apartments may regularly be occupied by no more than two (2) persons.

\* Two bedroom apartments may regularly be occupied by no more than four (4) persons.

\* Three bedroom apartments may regularly be occupied by no more than six (6) persons.

"Regular Occupancy" means occupancy for a period of time in excess of seven days on any one-occasion or twenty-one days in any one calendar year.

# APPLICATION FOR HOUSING

MARKET RENT

Please Print Clearly

This is an application for housing at:

Please complete this application and return with a \$35.00 application fee for each applicant over 18yrs to:

Alpha Management Corp.  
7 Oak Hill Terrace  
P.O. Box 310  
Scarborough, ME 04074  
(207)883-6779 fax

Applications are placed in order of date and time received. An applicant may be interviewed only after the receipt of this fully completed tenant application.

## A. GENERAL INFORMATION

**Bedroom size requested:** Studio One BR Two BR Three BR Handicap BR

**Complete the below information for each applicant over 18 yrs. of age:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Apt. #: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Do you currently RENT or OWN (circle one)

If owned, do you receive monthly rental income from property? Yes No (circle one)

Do you have a Section 8 Voucher or any type of voucher? Yes No (circle one)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Apt. #: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Do you currently RENT or OWN (circle one)

If owned, do you receive monthly rental income from property? Yes No (circle one)

Do you have a Section 8 Voucher or any type of voucher? Yes No (circle one)

**Are there are more than two applicants over the age of 18?** Yes No (circle one)

**If yes to the above question, please enter the same required information above on the back of this sheet for additional applicants over 18 yrs.**

**B. HOUSEHOLD COMPOSITION**

List ALL person who will live in the apartment starting with head of household.

	Name	Relationship to Head	Marital Status M- Married D-Divorced S-Single L-Legal Separation E-Estranged	Date of Birth	Age	Social Security #	Student YIN
Head							
Co-T							
3.							
4.							
5.							
6.							

Do you anticipate any additions to the household in the next twelve months? Circle:    No        Yes

If yes, explain:

**C. INCOME**

List ALL sources of income as requested below. If a section doesn't apply write N/A  
If there are more than two employers please enter additional on the back side of sheet.

Household Member Name	Source of Income	Gross Monthly Amount
	Employment Amount:	\$
	Employer:	
	Position Held:	
	How Long Employed:	
	Employment Amount:	\$
	Employer:	
	Position Held:	
	How Long Employed:	
	Unemployment Compensation:	\$
	Social Security:	\$
	Social Security:	\$
	Social Security:	\$
	Social Security:	\$

Household Member Name	Source of Income	Gross Monthly Amount
	<i>Alimony</i>	
	Are you entitled to receive alimony?	(Circle One) Yes No
	If yes, list amount that you are entitled to receive.	\$
	Are you entitled to receive alimony?	(Circle One) Yes No
	If yes, list amount that you are entitled to receive.	\$
	<i>Child Support</i>	
	Are you entitled to receive child support?	(Circle One) Yes No
	If yes, list amount that you are entitled to receive.	\$
	Are you entitled to receive child support?	(Circle One) Yes ___No___
	If yes, list amount that you are entitled to receive.	\$
	Other Income:	\$

TOTAL GROSS ANNUAL INCOME (based on monthly amount above):	\$
Do you anticipate any changes in this income in the next 12 months?	(Circle One) Yes No
If yes, explain:	
Real Estate Property: Do you own any property?	(Circle One) Yes No
If yes, type of property:	
Mortgage or outstanding loans balance due:	\$

D. ADDITIONAL INFORMATION	
Are you or any member of your household currently using an illegal substance?	(Circle One) Yes No
Have you or any member of your household ever been convicted of a crime? (excluding minor traffic violations)	(Circle One) Yes No
If yes, please describe:	
Have you or any member in your household ever been evicted from any housing?	(Circle One) Yes No
If yes, please describe:	
Have you ever filed for bankruptcy?	(Circle One) Yes No
If yes, please describe:	
Briefly describe your reasons for applying:	

F. REFERENCE INFORMATION		
Current Landlord	Name:	
	Address:	
	Home Phone:	
	Business Phone:	
	How Long?	
Previous Landlord	Name:	
	Address:	
	Home Phone:	
	Business Phone:	
	How Long?	

Personal Reference #1:	
Name:	
Address:	
Relationship:	Phone Number:
Personal Reference #2	
Name:	
Address:	
Relationship:	Phone Number:

<p><b>G. VEHICLE AND PET INFORMATION (if applicable)</b>  List any cars, trucks, or other vehicles owned. Parking will be provided for two vehicles.  Arrangements with Management will be necessary for more than two vehicles.  Commercial vehicles/trailers are prohibited.</p>	
Type of Vehicle:	License Plate #:
Year and Make:	Color:
Type of Vehicle:	License Plate #:
Year and Make:	Color:
Do you own any pets?	(Circle One) Yes    No
If yes, describe (type, number):	

CERTIFICATION

I hereby certify that this will be my permanent residence. I understand I must pay a security deposit for this apartment prior to occupancy. I understand that my eligibility for housing will be based on applicable income limits and by management's selection criteria. I certify that all information in this application is true to the best of my knowledge and I understand that false statements or information are punishable by law and will lead to cancellation of this application or termination of tenancy after occupancy. All adult applicants, 18 or older must sign application.

SIGNATURE(S):

(Signature of Tenant): \_\_\_\_\_ Date: \_\_\_\_\_

(Signature of Co-Tenant): \_\_\_\_\_ Date: \_\_\_\_\_

(Signature of Co-Tenant): \_\_\_\_\_ Date: \_\_\_\_\_

(Signature of Co-Tenant): \_\_\_\_\_ Date: \_\_\_\_\_

I (we) apply to lease the above described premises with the following understandings:

A \$35.00 application fee per applicant is required to process this application. This fee will not be refunded. If we do not process your application for acceptance, however, it will be returned. The deposit will not be refunded if applicant withdraws their application after investigation of acceptance, or if the applicant is not accepted. Once your application is accepted, security deposit must be paid in full within 48 hours. This deposit will be applied towards your amount due at move in and is not refundable. You may not take possession of the unit until rent and security deposit are paid in full, and the lease is signed by both parties.

No unusual decoration or alterations other than those specifically stated herein are required to be made by representatives who show apartments unless written on this form. Failure to make such decorations or alterations within a specified time will in no way affect the lease. The landlord will make the same expeditiously as circumstances permit.

The landlord assumes no responsibility to the applicant (s) for delay in giving possession due to failure of present occupant to vacate at the termination of lease, or if the unit is not ready for occupancy as expected, etc. except that the applicant (s) will be credited upon the rent to accrue, with an allowance equal to prorated amount of rent, multiplied by the actual number of days for which possession cannot be given, and the applicant agrees to accept the lease subject to such contingency and condition.

All leases will begin on the first of the month. A move-in at any other date will be prorated according to the date it is utilized.

Received \$ \_\_\_\_\_ application fee, which hereby acknowledged by the landlord.

The undersigned hereby acknowledge and agree that the landlord may make inquiries of the individuals noted by my/our signature, I/we hereby give permission for the landlord to investigate all claims, and I/we understand the landlord may look at my/our credit report and criminal and other background reports as a means of doing this.

I/We have read, fully understand and approve of all the pages of the application.

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

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

AUTHORIZATION

I/We do hereby authorize Alpha Management, and its staff to run a credit report and to contact any agencies, offices, credit bureaus, landlord or professional references for the purpose of verifying the information I/we provided on the application. The information provided will be used solely for the determination of my/our eligibility and admission to the housing I am/we are applying for and the information that is supplied will be kept confidential.

Signatures:

Applicant signature: \_\_\_\_\_ Date:

Co-applicant signature: \_\_\_\_\_ Date: