

GEM PROPERTY MANAGEMENT

Date: _____

1455 Mineral Spring Avenue, No. Providence, RI 02904

Office 401-231-7368, Fax 401-231-1910

RENTAL APPLICATION

Social Security Number: _____ Phone#: _____

I am applying for housing in (what city): _____

Name: _____ Marital Status: _____

Current Address: _____ Apt. #: _____

E-MAIL ADDRESS: _____

Total # of people to occupy apartment: _____ Total # of Children: _____

Present Landlord: _____ Address: _____

Landlords phone#: Home: _____ Work: _____

Employed by: _____ How Long? _____

Address: _____ Phone Number: _____

Position: _____ Monthly Income: _____

Supervisors Name: _____

SPECIAL REMARKS

Nearest Relative not living with you _____ Relation _____

Address _____ Phone#: _____

Are you a student? (YES) _____ (NO) _____ School Attending: _____

Department _____ Year(s) _____

Car: Make & Model _____ Year _____

License plate number & state: _____ Color: _____

Please furnish us a copy of your driver's license.

REFERENCES

Name/Address/Phone _____

Name/Address/Phone _____

I certify that this statement, which you may verify, is true and complete and understand that this application shall remain the property of Gemma Realty. ANY DISCREPANCY MAY DISQUALIFY ME.

Signature: _____ Date: _____