BURKE APARTMENTS TENANT APPLICATION

"EQUAL HOUSING OPPORTUNITY"

EMERALD GREEN APARTMENTS
SHERWOOD MEADOWS APARTMENTS
CRYSTAL CREEK VILLAS
TRANSIT STATION APARTMENTS

OAKWOOD GROVE APARTMENTS
CAPTAIN'S QUARTERS
EAGLE RIDGE COMMONS
EMAIL APP: BGLEISLE@BURKEBUILDERS.COM

Do you have pets How many All units are NON S	moking No 2-4 wheeled gas propelled vehicles			
Applicant:				
First Name MI Last Name	SS#			
E-Mail Address	Referral Source			
Present Address: How Long (If less than 2 years →)	Previous Address: How Long?			
Street Address	Street Address			
City State Zip	City State Zip			
Applicant Phone Number	Applicant Cell Phone Number			
Current Landlord: (If Less than 2 years♥)	Current Landlord Phone #:			
Previous Landlord:	Previous Landlord Phone#:			
Present Employer: How Long(If less than 2 years →)	Previous Employer: How Long?			
Position:	Position:			
Company:	Company:			
Address:	Address:			
Phone Number:	Phone Number:			
Annual Gross Income:	Other Income: Amount Source:			
ehicle Information:				
/ear:MakeModelPlate:	Year:MakeModelPlate:			
Emergency Contact:				
Name	Relationship			
Address	Phone Number			
Occupancy:	Application Submitted by: (please check)			
Number of Persons to occupy apartment:	Applicant Spouse Roommate Co-Signor			

THIS APPLICATION MUST BE SIGNED BY ALL PROSPECTIVE APPLICANTS FOR AN APARTMENT PRIOR TO BEING CONSIDERED AND PROCESSED BY THE LANDLORD AND/OR COORDINATOR. ACCEPTANCE OF THIS APPLICATION AND ANY MONEY DEPOSITED HEREWITH IS NOT BINDING UPON LANDLORD UNTIL A FORMAL LEASE AGREEMENT HAS BEEN EXECUTED BETWEEN LESSOR AND LESSEE. IF APPROVED, ALL MONEY DEPOSITED WITH THIS APPLICATION (EXCLUDING APPLICATION FEE) WILL BE HELD AS A RESERVATION DEPOSIT TO BE CREDITED TOWARDS ANY SECURITY DEPOSIT (NORMALLY ONE MONTH'S RENT) WHICH IS TO BE PAID IN FULL BY APPLICANT NO LATER THAN EXECUTION OF THE LEASE.

BY SIGNING BELOW, APPLICANT(S) AUTHORIZES THE LANDLORD AND/OR COORDINATOR TO INVESTIGATE THE INFORMATION SUPPLIED BY APPLICANT AND OBTAIN FULL DISCLOSURE OF PERTINENT INFORMATION INCLUDING INVESTIGATION OF MY CREDIT HISTORY, CHARACTER AND REPUTATION. A CREDIT REFERENCE REPORT FROM AN AUTHORIZED AGENCY IS REQUIRED BY THE LANDLORD. THERE IS A \$30.00 FEE FOR ANY RETURNED CHECKS.

APPLICANT			APPLI	ICANT		
ROOMMATE			ROOM	ИМАТЕ		
A NON-REFUNDAB	LE \$25.00 CREDIT	REPORT	FEE IS RE	EQUIRED TO PRO	OCESS APPLICA	ΓΙΟΝ
	Amt Due	An	nt Paid	Date	Check #	Receipt #
Application Fee	\$ 25.00	_ \$			-	-
Security Deposit	\$	_ \$				
Security Deposit Balance	\$	_ \$				
TO BE COMPLETED BY RENT.	AL COORDINATO	R				
Unit Rented: B	ldg. #	Apt.	#			
Monthly Rent:	\$		Secui	rity Required:	\$	
Rent Due at Move-in	\$	_				
Lease Period:		Thru	L.			



BURKE HOMES, LLC 5540 SOUTHWESTERN BLVD. HAMBURG, NY 14075 716-345-0430



AUTHORIZATION TO RELEASE INFORMATION RELATED TO A RESIDENTIAL LEASE APPLICANT

l,	have submitted an application
to lease a property located at	
	(address, city, state, zip).
The landlord, broker, or landlord's representative is:	
	(name)
	(address)
	(city, state, zip)
(phone)	(fax)
	(e-mail)
I give my permission:	
(1) to my current and former employers to release any income history to	nformation about my employment history and
the above-named person;	
(2) to my current and former landlords to release any in named person;	formation about my rental history to the above-
(3) to my current and former mortgage lenders on proposinformation about my mortgage payment history to the	
(4) to my bank, savings and loan, or credit union to prov to the above-named person; and	ide a verification of funds that I have on deposit
(5) to the above-named person to obtain a copy of my c consumer reporting agency and to obtain background in	
Applicants Signature	Date