

SOUTH SHORE APARTMENTS 8 Union St / PO Box 168 ~ South Weymouth, Ma ~ 02190
Office (781) 337-9478 Fax (781) 331-3883 Jessica cell 781-534-9461 JessicaJBerard@gmail.com
www.SSAPTS.com

Initial If Over 18 _____ Today's Date _____ Date Of Birth _____

Full Name _____ Cell # _____

Soc Sec # _____ Email address _____

Current Address _____
Street Name Town State Zip code

Date of Occupancy at current address -From: _____ To: _____ hm # _____

Name of Landlord _____ Tel# _____

Reason for Leaving _____

Previous Address _____
Street Name Town State Zip code

Date of Occupancy at previous address -From: _____ To: _____

Name of Previous Landlord _____ Tel# _____

Reason for Leaving _____

Current Employer _____ Occupation _____

Address _____ Take home pay/wk _____

Supervisor Name _____ Length Of Employment _____ Tel # _____

Other Employment and/or Other Income _____

Previous Employer _____ Tel # _____

Address _____ Length Of Employment _____

Mother's Name _____ Tel # _____

Address _____

Father's Name _____ Tel # _____

Address _____

Personal Reference _____ Yrs Acquainted _____

Address _____ Tel # _____

Description Of Automobile _____
Color Make Year Reg#

South Shore Apartments
8 Union St
PO Box 168
South Weymouth, MA 02190
781-337-9478

APPLICANT NAME _____

Have you ever had any criminal action(s) against you?

Yes _____ No _____

Have you ever had any rental problems at court, such as non-payment of rent or other actions against you?

Yes _____ No _____

Names of all persons who will live on the premises – any person over the age of 18 must fill out a separate application.

_____	_____
_____	_____
_____	_____

The applicant authorizes the landlord to verify income, background check, employment, credit and past housing record. The landlord agrees to keep all such information obtained confidential. The applicant swears that all the above statements are true and understands that the landlord may terminate any lease or rental agreement entered into with the applicant if any statement is not true.

APPLICANT SIGNATURE _____

DATED _____

*** Proof of Income (ex. current paystub) & \$20 Deposit Per Applicant Must Be Received Before The Application Will Be Processed ***