

**Plaza 7 LLC**  
1202 Troy Schenectady Road, B#3  
Latham, NY 12110  
(518) 783-4090 x-222  
FAX (518) 783-6394

COMMERCIAL SPACE RENTAL APPLICATION

**An application will not be processed without these items.**

Address of Desired Location: \_\_\_\_\_  
Desired Date of Occupancy: \_\_\_\_\_

**PERSONAL INFORMATION**

Applicant's Full Name: \_\_\_\_\_  
Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Co- Applicant: \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Social Security # \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Present Telephone Number: \_\_\_\_\_  
Other Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**EMPLOYMENT HISTORY**

EMPLOYER'S NAME/ADDRESS: \_\_\_\_\_  
Length of Employment \_\_\_\_\_  
Employer's Telephone #: \_\_\_\_\_ Position Held: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_ Monthly Income: \_\_\_\_\_

**BANKING AND CREDIT REFERENCES**

Bank: \_\_\_\_\_ Branch: \_\_\_\_\_  
\_\_\_\_\_

Checking Account #: \_\_\_\_\_ Savings Account # \_\_\_\_\_

CREDIT REFERENCE: \_n/a\_\_\_\_\_ Account # \_\_\_\_\_

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

CREDIT REFERENCE: \_n/a\_\_\_\_\_ Account # \_\_\_\_\_

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

CREDIT REFERENCE: \_n/a\_\_\_\_\_ Account #: \_\_\_\_\_

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

**MISCELLANEOUS INFORMATION**

Driver's License #: \_\_\_\_\_

Make/Year of Vehicle \_\_\_\_\_ Color: \_\_\_\_\_ Tag #: \_\_\_\_\_

Make/Year of Vehicle \_\_\_\_\_ Color: \_\_\_\_\_ Tag #: \_\_\_\_\_

Monthly Income: \$ \_\_\_\_\_

Other Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**QUALIFICATION REQUIREMENTS**

\*ALL applicants are subject to the following prior to final approval:

- a.) employment and income verification
- b.) present and past Landlord references
- c.) review of an Equifax credit report

1. No representations, promises or agreements as to occupancy, lease or date of possession have been made and this application shall not be construed as a lease or agreement thereof.
2. This application is made subject to Owner's approval.
3. If this application is approved, the deposit made will be held as security for the performance of all terms and conditions of the lease agreement by the applicant. If this application is approved by the Owner, or a qualified representative, and the applicant does not enter into a lease agreement, the deposit shall not be refunded. In the event this application is not approved, the

deposit will be refunded to the applicant and both parties shall have no further liability to each other.

4. The signing of the application gives 617 Maple Ave, LLC Associates or Richard G. Rosetti LLC the right to perform a credit check prior to approval.

I hereby made application for an apartment and certify that this information is correct I authorize Richard G. Rosetti, LLC or Maple Ave, LLC to contact any references that I have listed.

Applicant's Signature: \_\_\_\_\_

Co-Applicant's Signature: \_\_\_\_\_

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

*For Official Use Only--Do NOT Write Below*

Reference Verification:

Remarks

- \* Present Landlord-- \_\_\_\_\_
- \* Previous Landlord-- \_\_\_\_\_
- \* Employment-- \_\_\_\_\_
- \* Co-Resident Employment-- \_\_\_\_\_
- \* Bank \_\_\_\_\_
- bn \_\_\_\_\_
- \* Credit (1) \_\_\_\_\_
- \* Credit (2) \_\_\_\_\_

This application is:  Approved  
 Denied

Rental Agent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_