



100 State Route 245  
Rushville, NY 14544  
315.729.4897 or 315.651.2132  
Fax: 585-486-6012  
GroverPropertyGroup@gmail.com  
www.GroverPropertyGroup.com

## ***APPLICATION FOR LEASE / RENTAL***

### ***A note to prospective tenants:***

We run a clean, professional rental business and are proud to provide adequate, well maintained properties. We are easily assessable and take care of repairs as soon as possible – tenants are given both of our cell phone numbers and often home phone. For those of you who are inquiring on a unit that is in the same building or near our other units, you can be assured we've taken every measure possible to rent to well qualified tenants with a good rental history. In return for being seasoned landlords who take pride in our properties and do what needs to be done to provide you a nice home, we require: Respectful tenants who will care for the property, appreciate it and pay their rent on time. Thank you, in advance, for your understanding!

*~The Grovers*

**Specific Rental Property Your Applying for OR Your Desired Rental Needs (Min Bedrooms Required, Location Parameters):**

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**Tenant #1**

**Tenant #2**

### **CONTACT INFO:**

\_\_\_\_\_  
First Name, Middle Name, Last Name

\_\_\_\_\_  
First Name, Middle Name, Last Name

\_\_\_\_\_  
Home #

\_\_\_\_\_  
Home #

\_\_\_\_\_  
Cell #

\_\_\_\_\_  
Cell #

\_\_\_\_\_  
Email

\_\_\_\_\_  
Email

\_\_\_\_\_  
Social Security No

\_\_\_\_\_  
Social Security No

**INCOME:**

\_\_\_\_\_  
**Current** Employer

\_\_\_\_\_  
**Current** Employer

\_\_\_\_\_  
**Current** Employer Full Address

\_\_\_\_\_  
**Current** Employer Full Address

\_\_\_\_\_  
**Current** Employer Phone Number

\_\_\_\_\_  
**Current** Employer Phone Number

Start Date at **Current** Employer \_\_\_\_/\_\_\_\_/\_\_\_\_

Start Date at **Current** Employer \_\_\_\_/\_\_\_\_/\_\_\_\_

Monthly Gross Income from **Current** Employer  
\$ \_\_\_\_\_

Monthly Gross Income from **Current** Employer  
\$ \_\_\_\_\_

\_\_\_\_\_  
**Prior** Employer

\_\_\_\_\_  
**Prior** Employer

\_\_\_\_\_  
**Prior** Employer Full Address

\_\_\_\_\_  
**Prior** Employer Full Address

\_\_\_\_\_  
**Prior** Employer Phone Number

\_\_\_\_\_  
**Prior** Employer Phone Number

Start Date at **Prior** Employer \_\_\_\_/\_\_\_\_/\_\_\_\_

Start Date at **Prior** Employer \_\_\_\_/\_\_\_\_/\_\_\_\_

Monthly Gross Income from **Prior** Employer  
\$ \_\_\_\_\_

Monthly Gross Income from **Prior** Employer  
\$ \_\_\_\_\_

Other Income Sources: Type \_\_\_\_\_  
Monthly Total \$ \_\_\_\_\_

Other Income Sources: Type \_\_\_\_\_  
Monthly Total \$ \_\_\_\_\_

**EXPENSES:**

*Please List ALL of Your Total Monthly Expenses:*

Vehicle Loan \$ \_\_\_\_\_

Car Insurance \$ \_\_\_\_\_

Personal or other Loan \$ \_\_\_\_\_

Phone(s) \$ \_\_\_\_\_

Child Support or other Garnished Wages \$ \_\_\_\_\_

Child Care \$ \_\_\_\_\_

Health Insurance (out of pocket premium) \$ \_\_\_\_\_

TV/Cable \$ \_\_\_\_\_

Credit Card \$ \_\_\_\_\_

Other: (explain) \_\_\_\_\_ \$ \_\_\_\_\_

Other: (explain) \_\_\_\_\_ \$ \_\_\_\_\_

**TENANCY:**

\_\_\_\_\_  
**Present** Full Address

\_\_\_\_\_  
**Present** Full Address

\_\_\_\_\_  
**Present** Landlord's Name      Monthly Rent

\_\_\_\_\_  
**Present** Landlord's name      Monthly rent

\_\_\_\_\_  
**Present** Landlord's Full Address & Phone

\_\_\_\_\_  
**Present** Landlord's Full Address & Phone

\_\_\_\_\_  
Move In Date at **Present** Address

\_\_\_\_\_  
Move in Date at **Present** Address

\_\_\_\_\_  
**Prior** Full Address

\_\_\_\_\_  
**Prior** Full Address

\_\_\_\_\_  
**Prior** Landlord's Name      Monthly Rent

\_\_\_\_\_  
**Prior** Landlord's name      Monthly rent

\_\_\_\_\_  
**Prior** Landlord's Full Address & Phone

\_\_\_\_\_  
**Prior** Landlord's Full Address & Phone

\_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_  
Move In & Out Date at **Prior** Address

\_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_  
Move In & Out Date at **Prior** Address

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**IN CASE OF EMERGENCY:**

\_\_\_\_\_  
Vehicle yr.                      make and model

\_\_\_\_\_  
Vehicle yr.                      make and model

\_\_\_\_\_  
Color              license no

\_\_\_\_\_  
Color              license no

\_\_\_\_\_  
Emergency Contact Person

\_\_\_\_\_  
Emergency Contact Person

\_\_\_\_\_  
Relationship to You

\_\_\_\_\_  
Relationship to You

\_\_\_\_\_  
Emergency Contact Person #

\_\_\_\_\_  
Emergency Contact Person #

**MISCELLANEOUS:**

Have you ever been tried or convicted of a Misdemeanor or a felony? Yes/No  
If Yes, Please Explain:

Have you ever been tried or convicted of a misdemeanor or a felony? Yes/No  
If Yes, Please Explain:

Have you ever been evicted from a property? Yes/No. If Yes, Please Explain:

Have you ever been evicted from a property? Yes/No. If Yes, Please Explain:

Do any applicants have pets? (please circle answer) Yes/No – If yes, describe how many and their breed, etc.

Do any applicants smoke? (please circle answer) Yes Both / Yes at least one / No, Neither

Do you have or plan to get rent assistance from any agency? (circle answer) Yes/No  
If Yes, What agency and how much do they pay towards your rent? What is their contact information?

Are you currently in a lease? Yes/No, If Yes, When does the lease end? \_\_\_\_\_

What date are you able to pay first month's rent & deposit & sign a lease? Month \_\_\_\_\_ Day \_\_\_ Year \_\_\_\_\_

Are you getting assistance from any agencies for the deposit & first month's rent? Yes/No, If Yes, Please Explain: \_\_\_\_\_

Do you have any current or past debts with utility companies? Yes/ No – it will show up when you try to apply for service so please be honest now to save us all time. If Yes, Please explain: \_\_\_\_\_

Will you sign a 1 year lease? Yes/No

Please list all dependents/others in your household:

_____ Name	_____ Age	_____ Relationship to you
_____ Name	_____ Age	_____ Relationship to you
_____ Name	_____ Age	_____ Relationship to you

_____ Name	_____ Age	_____ Relationship to you
_____ Name	_____ Age	_____ Relationship to you

**Any attempt to falsify information on this application and/or any information that is found to be false shall be grounds for immediate eviction. I grant permission for Travis and Amanda Grover to call upon any current or previous landlords listed on this application for a reference as to their tenancy with such landlord(s).**

Date of Application: \_\_\_\_\_

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Applicant Name Printed

\_\_\_\_\_  
Applicant Name Printed

**\*\*\*\*PLEASE PROVIDE A COPY OF YOUR DRIVER'S LICENSE WITH THIS APPLICATION\*\*\*\***  
**YOU MAY DROP THIS APPLICATION OFF AT 100 STATE ROUTE 245; RUSHVILLE, NY (AT THE AMANDA GROVER REAL ESTATE OFFICE – ON THE RIGHT SIDE OF THE BUILDING). IF NOBODY IS THERE, PLEASE DROP THE APPLICATION IN THE LOCKED BOX TO THE RIGHT OF THE OFFICE DOOR).**

Or, EMAIL THE APP back to [GroverPropertyGroup@gmail.com](mailto:GroverPropertyGroup@gmail.com).

**Thank you!**