

# Cedar Ridge

## RENTAL APPLICATION

Thank you for your interest in Cedar Ridge, a village community of independent elderly apartments. This application is to be completed, which will assure the applicant's right to select an apartment in order of receipt.

### APPLICANT INFORMATION

Name:  
Address:  
City: Zip Code: E-Mail:  
Phone: Home: Cell: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_

### CO-APPLICANT INFORMATION

Name:  
Address:  
City: Zip Code: E-Mail:  
Phone: Home: Cell: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Social Security Number: \_\_\_\_\_

### HOUSEHOLD INFORMATION

Number of Persons in Household: Adults: \_\_\_\_\_  
Length of time needed to facilitate a move: \_\_\_\_\_

### CURRENT EMPLOYER(S)

Applicant: Years with current Employer:  
Co-Applicant: Years with current Employer:

### INCOME INFORMATION

Total Monthly Household Income (base salary/wages (if applicable), Social Security benefits, VA benefits.

Employment : \$  
 Social Security/SSI: \$  
 Veterans Benefits: \$  
 Other (Specify \$ Income is from:  
**Total Income:** \$

**PREFERENCES**

Please list any preferences you have regarding the apartment (i.e. location, accessibility):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**CRIMINAL RECORD**

<b>Household Member Criminal Activity Report</b>	<b>YES</b>	<b>NO</b>
Has any household member been convicted of a felony within the past 10 years?		
Has any household member been evicted for drug related activity in the past 3 years?		
Is any household member subject to and state or federal registration for sexual offenses?		
Has any household member been convicted of a crime involving alcohol abuse?		
Has any household member been convicted of a crime involving violence?		

**All household members will be subject to a Criminal Background check**

**Certification and Authorization to Release Information**

I (we) hereby certify that the information provided is true and correct as of the date set forth opposite my (our) signature(s) and acknowledge my (our) understanding that any intentional or negligent misrepresentation of the information contained herein will result in my (our) application being denied. Further, I (we) authorize the release of information to Connecticut Baptist Housing, Inc. and/or their agents.

Applicant's Signature:

Date:

Co-Applicant's  
Signature:

Date:

292 Thorpe Avenue Meriden, Ct 06450 (203) 237-1206

