

Rental Application for 7 Emerald Street, LLC.

Name: _____

Address: _____

Phone (home): _____

Phone (cell): _____

Email Address: _____

Social Security Number: _____

Employers Name and Address: _____

Local reference name and phone: _____

If a Student, what is your current year and GPA: _____

IF A STUDENT WILL OCCUPY THE RENTAL PROPERTY THEY MUST HAVE A PARENT or GUARDIAN CO-SIGNER:

Parent / Guardian Name: _____

Address: _____

Phone (home): _____

Phone (cell): _____

Email Address: _____

Social Security Number: _____

Employers Name and Address: _____

Signature (Parent / Guardian if student will occupy)

Date

By signing above, I authorize 7 Emerald Street, LLC to obtain a credit report. I understand that this application in no way binds 7 Emerald Street, LLC to rent the property to the applicant.

Please fax application to: 603-357-9335

Or email your application to: info@7emerald.com

or mail your application to: 7 Emerald Street, LLC
First Floor - Curry Copy
7 Emerald Street
Keene NH 03431