

Winn Associates Property Management, Inc.

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Rental Application

For Office Use Only	
DATE:	_____
PROPERTY	_____
APT #	_____ RENT _____

Date of Application _____	Desired Date of Occupancy _____
Type and Size of Apartment Wanted (No. of Bedroom,etc.) _____	

PERSONAL INFORMATION

Applicant's Full Name _____ Date of Birth _____
 Social Security No. _____ Driver's License No./State _____
 E-Mail Address _____

Co-Applicant's Full Name _____ Date of Birth _____
 Social Security No. _____ Driver's License No./State _____
 E-Mail Address _____

Full Name's of all Other Occupant's	Relationship to you	Date of Birth
_____	I	I
_____	I	I
_____	I	I
_____	I	I

How Many Pet's _____ Breed _____
 How did you hear about this Property _____

RESIDENCE HISTORY

Present Address _____
 Present Telephone _____ Dates From _____ To _____
 Present Landlord or Mortgage Co. _____ Telephone _____
 Monthly Payment \$ _____ Reason for Moving _____
 Previous Address _____
 Date's From _____ To _____
 Previous Landlord or Mortgage Co. _____
 Monthly Payment \$ _____ Reason For Leaving _____

EMPLOYMENT INFORMATION

Present Employer _____
 Employer's Address _____ Telephone _____
 Position _____ Supervisor _____ Gross Monthly Salary \$ _____

Previous Employer _____
 Employer's Address _____ Telephone _____
 Position _____ Supervisor _____

Co-Applicant's Employer _____ Dates From _____ To _____
 Employer's Address _____ Telephone _____
 Position _____ Supervisor _____ Gross Monthly Salary \$ _____

