New Horizon Living Center	
	Residency Application
	Bristol, CT 06010
	Tel. (860) 584-2105
	Fax (860) 582-8609
Name	Home Phone #
Date of Birth	Social Security #
Work Phone #	Cell Phone #
CT License #	Email
Closest Relative #	
Present Address	Zip Code
Years at Present Address	Rent \$
Present Landlord	Landlord Phone #
Can we call? YES / NO	Do you have a lease? YES / NO
Utilities in your name: GAS: OTHER:	_ ELECTRIC: PHONE: CABLE:
Previous Address	Zip Code
Previous Landlord	Landlord Phone #
Can we call? YES / NO R	eason for moving:
Did you have a lease? YES / NO	
Have you ever been evicted? YE	S / NO If YES, explain
Have you been arrested? YES /	NO Convicted YES / NO Reason:
	n any litigation involving a landlord? YES / NO
Total # of people to live in apt.:	List names: (use reverse if needed)
Employer Name:	Employer#

Employer Address:	Zip Code
How long have you worked here?	Supervisor
Are you in the military YES / NO	Do you have plans to join the military? YES / NO
Income from employment per mont	h \$ Other income per month?
Source of other income (optional)_	
Other rental assistance \$	From where? (optional)
Outstanding monthly debt: LOANS	S: CREDIT: BILLS:
Total \$	
Relative Name	Relationship
Address	Phone
Personal Reference	Phone
Address	Relationship
Personal Reference	Phone
Address	Relationship
Personal Reference	Phone
Address	Relationship
Current Bank	CHECKING Y / N SAVINGS Y / N

Tenancy subject to verified reference and credit checks. I/We hereby apply for the apartment listed above. With my signature I hereby authorize and request all credit reporting agencies, employers, credit and personal references release all pertinent information about me. A photocopy of this shall be as valid as the original. I understand that the credit report (rental history, arrest, and/ or conviction records, credit history and tenant performance) may be done. I have read and understand everything on this application.