

**APPLICATION FOR
GRADUATE & UNDERGRADUATE
MARRIED/FAMILY STUDENT HOUSING**



Applications must be submitted to:

Mailing address:
City Station Management Office
1520 6th Ave
Troy, Ny 12180

Email address:
citystation@mycollegesuites.com

**LEARN MORE ABOUT
College Suites at City Station**

MyCollegeSuites.com/CityStation



RENTAL APPLICATION

Co-applicants must complete a separate application

FIRST NAME: _____ MI: _____ LAST NAME: _____ RIN #: _____

CURRENT ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

TELEPHONE #: _____ E-MAIL ADDRESS: _____

CELL #: _____ DATE OF BIRTH: _____ SSN: _____

I AM APPLYING FOR: 1 BEDROOM/1 BATH 2 BEDROOM/2 BATH 3 BEDROOM/1 BATH

RENSSELAER POLYTECHNIC INSTITUTE GRADUATE ENROLLMENT STATUS AS OF:

FALL 20_____ SPRING 20_____

INCOMING GRADUATE STUDENT CURRENT GRADUATE STUDENT

CO-TERMINAL STUDENT OTHER: _____

UNDERGRADUATE

DEPARTMENT: _____ ADVISOR: _____

RESIDENCE HISTORY

CURRENT ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

DO YOU CURRENTLY: RENT OWN MONTH/YEAR MOVED IN: _____ # OF ROOMS: _____

MONTHLY RENT: \$ _____ UTILITIES INCLUDED: YES NO

IF UTILITIES NOT INCLUDED, WHAT IS YOUR MONTHLY UTILITY COST? \$ _____

REASON FOR LEAVING: _____

LANDLORD NAME: _____ PHONE: _____

PREVIOUS ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

(IF MOVED WITHIN THE LAST TWO YEARS)

RENT OWN MONTH/YEAR MOVED IN: _____ # OF ROOMS: _____

MONTHLY RENT: \$ _____ UTILITIES INCLUDED: YES NO

IF UTILITIES NOT INCLUDED, WHAT IS YOUR MONTHLY UTILITY COST? \$ _____

REASON FOR LEAVING: _____

LANDLORD NAME: _____ PHONE: _____

EMPLOYMENT INFORMATION

CURRENT EMPLOYER: _____ YEARS EMPLOYED: _____

JOB TITLE: _____ EMPLOYER'S TELEPHONE #: _____

BUSINESS ADDRESS: _____

SUPERVISOR'S NAME: _____ SUPERVISOR'S TELEPHONE #: _____

SALARY: \$ _____ WEEK MONTH YEAR FULL TIME PART TIME

PREVIOUS EMPLOYER: _____ YEARS EMPLOYED: _____

JOB TITLE: _____ EMPLOYER'S TELEPHONE #: _____

BUSINESS ADDRESS: _____

SUPERVISOR'S NAME: _____ SUPERVISOR'S TELEPHONE #: _____

SALARY: \$ _____ WEEK MONTH YEAR FULL TIME PART TIME

OCCUPANTS

List all household members who will live in the apartment. Be sure to include any temporarily absent family members (such as military/student) who will be returning to the household.

FULL NAME RELATIONSHIP DATE OF BIRTH SOCIAL SECURITY NUMBER

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VEHICLE INFORMATION

DRIVER'S LICENSE/ID NUMBER: _____ STATE: _____

VEHICLE YEAR/MAKE: _____ LICENSE PLATE #: _____ COLOR: _____

VEHICLE YEAR/MAKE: _____ LICENSE PLATE #: _____ COLOR: _____

EMERGENCY CONTACT

EMERGENCY CONTACT #1: _____
NAME/RELATIONSHIP TELEPHONE #

EMERGENCY CONTACT #1: _____
NAME/RELATIONSHIP TELEPHONE #

HAVE YOU EVER...

Been evicted from tenancy? YES NO

If *yes*, please explain: _____

Been convicted of a felon? YES NO

If *yes*, please explain: _____

Willfully or intentionally refused to pay rent when due? YES NO

If *yes*, please explain: _____

Will this unit be your only place of residency? YES NO

If *no*, please explain: _____

PLEASE READ CAREFULLY BEFORE SIGNING

No written or oral agreement will be recognized by owner or agent unless and to the extent set forth in lease. I consent that the owner/agent may conduct a credit, background, criminal and reference check of me and any guarantors required by their policies. I agree that the owner/agent may use any credit bureau and any reporting or investigative agencies to obtain records regarding my credit tendencies, employment history, and any other credit information that may be submitted by the aforementioned agencies. Approval of application does not guarantee room; lease must be signed and completed with security deposit and administrative fee prior to the time of property occupancy in order to reserve a room. By signing below I acknowledge that I have read and agreed to the terms and conditions and provide that all information above is true and correct.

APPLICANT'S SIGNATURE

PRINT NAME

DATE

CO-APPLICANT'S SIGNATURE

PRINT NAME

DATE

NOTE: Please mail or hand deliver (see addresses below) the application materials to the City station Management Office.

Mailing address: City Station Management Office
1520 6th Ave
Troy, NY 12180

Email address: citystation@mycollegesuites.com

Application Materials Check List:

- Completed and Signed Application
- Completed and Signed Resident Profile
- \$500 Deposit (Refundable if not approved for residency)
- \$50 Application Fee (Non-Refundable)

Make check payable to: CityStation South, LLC

Credit Card Payment: <https://www.rentpayment.com>

OFFICE USE ONLY (PLEASE DO NOT WRITE IN THIS SPACE)

AMOUNT RECEIVED

Security Deposit \$ _____

Rent \$ _____

Application Fee \$ _____

Total \$ _____

| | | | |
|--------------------------------------|------------------|----------------|----------------|
| Apartment Rent | Apartment Type | Apartment # | Account # |
| Additional Rent | Security Deposit | Years Occupied | Date Available |
| Term | From | To | Occupancy Date |
| <input type="checkbox"/> Approved | Rental Agent | | Date |
| <input type="checkbox"/> Disapproved | By Whom | | Date |