

Mill Street Senior Apartments, LLC
408 Mill Street
Amherst, NY 14221



PARK CREEK APARTMENTS
Adult Luxury Living at Amherst State Park

RENTAL APPLICATION

For Office Use Only

1 Bedroom _____ Rental Payment \$ _____

2 Bedroom _____ Rental Payment \$ _____

Unit # _____

Move-in Date ____/____/____

Leasing Manager Authorization _____

Please deliver completed application to our leasing office during normal office hours or email to info@park-creekapartments.com

Applicant Information

Last Name _____ First _____ MI _____

DOB ____/____/____ Social Security Number ____ - ____ - ____

Tel – Daytime _____ Tel – Evening _____ Email _____

Present Address _____
Street City State Zip Code

Years at Current Residence _____ OWN / RENT (circle) Monthly Rent/Mortgage \$ _____

Reason(s) for Leaving _____

Owner/Landlord Name _____ Phone # _____

Previous Address _____
Street City State Zip Code

Years at Previous Residence _____ OWN / RENT (circle) Monthly Rent/Mortgage \$ _____

Reason(s) for Leaving _____

Owner/Landlord Name _____ Phone # _____

Current Employment _____ Starting Date ___/___/_____

Annual Income \$ _____ Supervisor's Name _____ Phone _____

Employment Address _____
Street City State Zip Code

Previous Employment _____ Starting Date ___/___/_____

Annual Income \$ _____ Supervisor's Name _____ Phone _____

Employment Address _____
Street City State Zip Code

Other forms of Income, as verifiable by personal tax returns, W-2's, etc.

Source of Income _____ Monthly Income \$ _____

Source of Income _____ Monthly Income \$ _____

Co-Applicant Information

Last Name _____ First _____ MI _____

DOB ___/___/_____ Social Security Number _____ - _____ - _____

Tel – Daytime _____ Tel – Evening _____ Email _____

Present Address _____
Street City State Zip Code

Years at Current Residence _____ OWN / RENT (circle) Monthly Rent/Mortgage \$ _____

Reason(s) for Leaving _____

Owner/Landlord Name _____ Phone # _____

Previous Address _____
Street City State Zip Code

Years at Previous Residence _____ OWN / RENT (circle) Monthly Rent/Mortgage \$ _____

Reason(s) for Leaving _____

Owner/Landlord Name _____ Phone # _____

Current Employment _____ Starting Date ___/___/_____

Annual Income \$ _____ Supervisor's Name _____ Phone _____

Employment Address _____
Street City State Zip Code

Previous Employment _____ Starting Date ___/___/_____

Annual Income \$ _____ Supervisor's Name _____ Phone _____

Employment Address _____
Street City State Zip Code

Other forms of Income, as verifiable by personal tax returns, W-2's, etc.

Source of Income _____ Monthly Income \$ _____

Source of Income _____ Monthly Income \$ _____

Total Annual Household Income from Employment and Other Forms of Income \$ _____

List All Occupants (other than Applicant and Co-Applicant)

Last Name _____ First _____ MI _____

Last Name _____ First _____ MI _____

Have you ever been delinquent in payment of your rent?

If yes, please explain _____

Have you ever been a defendant in an unlawful detaining (eviction), lawsuit or defaulted (failed to perform) any obligations of a rental agreement or lease?

If yes, please explain _____

Emergency Contact Information

Emergency Contact Name _____ Phone # _____

Relation to Resident(s) _____

Pets

Will pets be joining you at Park Creek? YES / NO (circle)

Type, Breed, Weight _____

Type, Breed, Weight _____

Vehicles

Year _____ Make _____ Model _____ License Plate # _____

Year _____ Make _____ Model _____ License Plate # _____

How did you hear about Park Creek Apartments?

