

Paradise Agency, LLC



Property Development and Management

151 Broadway P.O. Box 175

Colchester, Connecticut 06415 Phone: (860) 537-7044 • Fax: (860) 537-1142 • TDD/TT: 1-800-842-9710

Visit us at www.ParadiseAgency.com

Gan Aden Too of Colchester Maple Drive and Dogwood Lane (off Norwich Avenue) Colchester, CT 06415

Thank you for your interest in our apartments! Please complete our Rental Application as accurately as possible and return it to this office at the address noted above. Should you have any questions about the application or any step in the application process, please do not hesitate to contact us.

Gan Aden Too of Colchester comprises 54 apartments. All of the apartments are one-story "garden style." Social areas and laundry facilities for resident use are provided in the community hall. All apartments are barrier-free. We have three floor plans at Gan Aden Too of Colchester, as follows:

Floor Plan 1: One bedroom, carpeted flooring, walk-in shower unit, approximately 680 sq. ft.

Floor Plan 2: Two bedrooms, carpeted flooring, walk-in shower unit, approximately 725 sq. ft.

Floor Plan 3: Two bedrooms, laminate flooring, walk-in shower unit, with washer and dryer hook-up in the apartment, approximately 950 sq. ft.

All apartments include heat with the rent.

As you complete the application process, please note the following:

- 1. Your household income must total at least \$26,000 for Floor Plan 1 and Floor Plan 2 apartments, and \$30,000 for Floor Plan 3 apartments. We will ask for verification of all sources of income.
- 2. When an apartment becomes available, we will contact you and schedule a time to show it to you. After you see the apartment, if you decide to proceed with your application, we will collect a \$25.00 fee for a credit history and criminal background report for each applicant and each household member over the age of 18.
- 3. After reviewing your application (including the credit history and criminal background report), we will contact you to tell you whether your application has been approved, and if so, we will offer you the apartment.
- 4. If you accept the apartment, we will ask you to provide us a \$400.00 non-refundable deposit, which will be applied toward your security deposit. We will also schedule a time to meet you to sign the lease. You will be required to pay the balance of your security deposit and the first month's rent at the time the lease is signed.
- 5. Pets are not allowed.

Thank you!



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Rental Application

FOR OFFICE USE ONLY
Date App. Rcvd
Deposit Rcvd & Date
Unit Occ & Date

GAN ADEN TOO OF COLCHESTER, Maple Dr. and Dogwood Lane. in Colchester CT 06415

Would you like your applic	ation to be considered f	or other similar prope	erties we mana	ge? YES NO	
Please indicate which Style of Floor Plan 1 (One bedroom)			n 3 (Two bedroor	n w/ laundry)	
APPLICANT / CO-APPLIC	ANT INFORMATION				
FULL NAME (Applicant)	Social Security # Date of Birth				
Email address	Phone	Cell			
FULL NAME (Co-Applicant) Relationship to Applicant		Social Security Date of Birth			
Email address	Phone	Cell			
3. INFORMATION ABOUT ALL Name Date	OTHER OCCUPANTS of Birth Gender	Relationship	Social Securi	ty Number	
RESIDENCE HISTORY					
CURRENT ADDRESS (Application Length at this address				Zip	
Expenses: Rent	Fuel	Electric	Other _		
Owner/Agent/Landlord:		Phone: ()		
Have you ever been evicted?	Yes No	If yes, please explain on	attached page.		
2. CURRENT ADDRESS (Co-App	Street	City	State	Zip	
Length at this address	Reason for Leaving				
Expenses: Rent	Fuel	Electric	Other		
Owner/Agent/Landlord:		Phone: ()		
Have you ever been evicted?	☐Yes ☐No	If yes, please explain on	attached page.		

3. PR	EVIOUS ADDRESSES	if within 3 years:				
Applic	cant:Street		City	State	Owner/Agent/Landlord	
Length	n at this address:	Reason fo	or Leaving:			
Co-Ap	oplicant:Street					
						Owner/Agent/Landlord
Length	n at this address:	Reason fo	or Leaving:			
ANK .	AND CREDIT RE	FERENCES				
Bank l	Name (City, State	Branch	h	Type of Account	Account Number
1.						
2						
	you ever filed for bankru	ptcy? Applican	t: Ye	s No	If was inlease avrila	nin on attached page.
Have y	you ever med for bankru	Co-Appli	=	=		nin on attached page.
MDI (OYMENT INFORM	MATION				
WIF LA	JIMENI INFORE	VIATION				
1. EM	IPLOYER (Applicant)					
Emplo	oyer's Address				Phone()
Positio	on	Superviso	or	Date Employment Began		
2. PR	EVIOUS EMPLOYER ((Applicant)			Phone()
May w	ve contact your current e	mpioyer?	Yes	□No		
3, EM	IPLOYER (Co-Applican	nt)				•
Emplo	yer's Address				Phone(_)
Positio	Position Supervisor		or	_Date Employment Began		
)
						/
May w	ve contact your current e	mployer'?	∐Yes	∐No		
INCO:	ME INFORMATION	ON				
Please	fill in gross annual amo	unts from the follo	wing sources of i	ncome:		
			Ü	Applica	nnt	Co-Applicant
1.	Wages			прриса		Тррпсин
2.	Social Security					
3.	Veteran's Benefits					
4.	Interest Income					
5.	Pension/Annuity					
6.	Business/Rental					
7.	Public Assistance					
8.	Child Support/Alimo	ony				
9.	Unemployment Bene	efits				
10.	Family Support					
11.	Other (please detail)					
12.	TOTAL INCOME: x	vearly				

PLEASE NOTE THE FOLLOWING:

- When an apartment becomes available, the Applicant and Co-Applicant each will be charged a non-refundable application fee.
- A credit check and criminal background check will be performed for both Applicant and Co-Applicant.
- This is a preliminary application and in no way guarantees that you will be offered an apartment.
- Additional information may be requested in order to complete the processing of your application.
- Should you lease an apartment, this application and the information it contains are made parts of the lease entered into between the Applicant/Co-Applicant and Paradise Agency, LLC. Any material misrepresentation in the information provided herein will constitute a default under the lease.

AUTHORIZATION AND RELEASE

By signing below, the Applicant and Co-Applicant represent that the information contained herein is true and
complete. The Applicant and Co-Applicant also hereby authorize Paradise Agency, LLC and its agents to perform all
necessary inquiries to verify the information contained in this application, including searches of credit records and
other public documents.

Applicant Signa	ature		Date	
Co-Applicant S	Signature		Date	
<u>ADDITIONAL</u>	L INFORMATION	/ EXPLANATION		
Please use the s	space below to expla	in in more detail any of your	responses.	
				
				
				
Credit Fee:	Amount:	FOR OFFICE	USE ONLY Date Rec'd:	
Unit Shown:	Prop:		Date Shown:	
Comments:				