

RENTAL APPLICATION

Applying For Property at:

Unit:

Projected move-in date, if accepted:

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APPLICANT PERSONAL INFORMATION

Applicant (First, Middle, Last):

Social Security Number:

Birth Date:

Driver's License #:

Present Address (street, city, zip):

How long at this address (months)?:

Current Phone:

E-mail:

Current Landlord's Name:

Phone:

Current Rent \$:

Why Moving?:

Was Notice Given? YES NO

Previous Address (street, city, zip):

Previous Landlord's Name:

Phone:

How long at this address (months)?:

Monthly Rent \$:

Why Did You Move?:

How many pets ?:

What breed, weight, size?:

Neutered? YES NO

If cat, de-clawed? YES NO

Is pet current with all shots? YES NO

CO-SIGNER PERSONAL INFORMATION

Co-Signer (First, Middle, Last Name):

Social Security Number:

Birth Date:

Driver's License #:

Present Address (street, city, zip):

How long at this address (months)?:

Phone:

E-Mail:

Own Real Estate? YES NO

Address (if different from above):

Previous Address (Street, City, ZIP):

Relationship to Applicant:

FINANCIAL INFORMATION

Applicant Occupation: Full Time Part Time (less than 32 hrs)

Employer:

Address: Length of employment?: Years Months

Gross Income (Monthly): *(Include copies of two recent pay stubs when returning application)*

Employer Contact: Phone:

Previous Employer: Length of employment?: Years Months

Why did you leave? Gross Income (Monthly):

Applicant Additional Employment/Income

Employer:

Address: Length of employment?: Years Months

Gross Income (Monthly): *(Include copies of two recent pay stubs when returning application)*

Employer Contact: Phone:

Other Source of Income (Student Loan, etc.):

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Co-Signer Applicant Occupation: Full Time Part Time (less than 32 hrs)

Employer:

Address: Length of employment?: Years Months

Gross Income (Monthly): *(Include copies of two recent pay stubs when returning application)*

Employer Contact: Phone:

Other Source of Income:

Previous Employer: Length of employment?: Years Months

Why did you leave?: Gross Income (Monthly):

Co-Signer Additional Employment/Income:

Employer:

Address: Length of employment?: Years Months

Gross Income (Monthly): *(Include copies of two recent pay stubs when returning application)*

Employer Contact: Phone:

Other Source of Income (Student Loan, etc.):

Credit References: List credit cards and present loans *(if you need more room list on separate sheet of paper)*

Institution Name	Account #	Balance	Monthly Payment

Personal References: Please list two non-relatives with name and phone number.

Reference #1: _____ Phone: _____

Reference #2: _____ Phone: _____

APPLICANT BACKGROUND INFORMATION

How long have you lived in the area?: _____ Length of expected stay: _____ How many in party smoke?: _____

Do you have renters insurance?	YES	NO
Do you have a waterbed?	YES	NO
Insurance on the waterbed?	YES	NO
Have you ever broken a lease?	YES	NO
Have you ever had a judgment entered against you?	YES	NO
Have you ever had rental security not returned?	YES	NO
Have you ever been evicted or asked to move?	YES	NO
Do you have any history of drug use or offenses?	YES	NO
Have you ever been convicted of a felony?	YES	NO
Do you currently have phone service in your name?	YES	NO

What utilities are in your name?: _____

Please explain all "Yes" answers from the above questions:

Person to contact in an emergency: _____ Phone: _____

Emergency contacts address (City State, Zip): _____

Vehicle Information for cars Parked at the Property (Copies of registration and insurance must be provided with application)

Vehicle # 1 (Year, Make, Model, Color): _____ Plate # _____ State _____

VIN # _____ Is the car financed? YES _____ NO _____ Monthly Payment: _____

Vehicle # 2 (Year, Make, Model, Color): _____ Plate # _____ State _____

VIN # _____ Is the car financed? YES _____ NO _____ Monthly Payment: _____

Additional Vehicles: _____

Do you have any commercial vehicles, RVs, campers, boats, or motorcycles? Please List . _____

How did you hear about this vacancy? Google Newspaper Rental agency Friend Current tenant
Craigslist Campus sign Off Campus Directory Other

By signing below, applicant(s) represents that all information in this application is true and complete under Penalty of Perjury. Applicant(s) hereby authorizes a credit and police check, judgment search, and verification of references. Applicant(s) understands that if any information is found to be false or misleading the application fee and all deposit money being held by Landlord will not be returned. Applicant(s) further agrees that Landlord may end the lease immediately if any false information has been provided in this application after move in. Renters insurance is required if bringing a pet.

Signatures of all parties 18 years or older _____

Mail this completed application with a \$25 non-refundable fee for the APPLICANT and a \$25 non-refundable fee for the CO-SIGNER to: 1710 East Lancaster Ave. #324, Paoli, PA 19301

Applications cannot be processed until all information requested has been received. To speed processing, include copies of the following:

- ___ Two recent pay stubs for each person over 18, alimony, child support, pension checks, other income.
- ___ Copies of driver's licenses and vehicle registration for everyone 18 years or older
- ___ Copies of auto insurance form showing company name, policy number, expiration date, & phone number.
- ___ If self employed, a copy of last year's tax return.

