PENNSYLVANIA RENTAL/LEASE APPLICATION

Date of Application:	
Property Address:City, State, Zip Code:	Unit No.:
<u>Applicant</u>	
First Name Middle Initial Date of Birth Social Securit Phone Number Email Add Driver's License No Drive	y Number
<u>Applicant</u>	
First Name Middle Initial Date of Birth Social Securit Phone Number Email Add Driver's License No Drive	Last Name y Number lress er's License State of Issue
Residence History	
Provide at least years of history. Current Address City, State, Zip Code Dates of Residence: From / To Reason For Moving Check one: □ Own □ Rent □ Other (specify) If Rent, Name of Landlord	/ Monthly Rent \$
Previous Address	Unit No.
Dates of Residence: From/To	_/ Monthly Rent \$
Have you ever been evicted? (Check one) Yes If yes, provide explanation	□ No
Have you ever broken a lease? (Check one) Yes If yes, provide explanation	S 🗆 No
Employment / Financial	
Provide at least years of history.	
Current Employer Posi Address City, State, Zip Code	ition/Title



Name of Supervisor	Phone Number	
Dates of Employment: From/ To _		
Monthly Income \$		
Previous Employer	Position/Title	
Address		
City, State, Zip Code	· · · · · · · · · · · · · · · · · · ·	
Name of Supervisor	Phone Number	
Name of Supervisor	/	
Monthly Income \$		
Working moonie #		
Descious Englaves	Decition/Title	
Previous Employer	Position/Title	
AddressCity, State, Zip Code		
City, State, Zip Code		
Name of Supervisor/	Phone Number	
Dates of Employment: From/ To _		
Monthly Income \$		
Other Sources of Income		
(Provide any other sources of income that you was	ant the Landlord to consider.)	
	,	
Source of Income	Amount of Income \$	
Source of Income	Amount of Income \$	
Source of Income	Amount of Income ¢	
Source of Income	Amount of income \$	
<u>Financial Accounts</u>		
(Examples include Savings Account, Checking Account, Credit Account)		
Name Acco	ount Type	
Account Number		
Name Acco	ount Type	
Name Account Number	·	
Name Acco	ount Type	
Name Account Number		
NameAcco	ount Type	
Account Number		
Name Acco	ount Type	
Account Number		
/ NOODUITE INCHIDE		



List All Other Occupants at the Property NameAgeRelationshipNameAgeRelationshipNameAgeRelationship **Vehicles to be Parked at Property** Vehicle Make ______ Model _____ Year _____ Color _____State ____State ____ Vehicle Make ______ Model _____ Year _____ Color _____State _____State ____ Pets Do you have any pets? (Check one) □ Yes □ No If Yes, Type ______ Breed _____ Weight _____ **Smoking** Do any of the occupants smoke? (Check one) □ Yes □ No **Other** Have you ever been convicted of a crime? (Check one) □ Yes □ No If yes, provide explanation _____ Have you ever declared bankruptcy? (Check one) □ Yes □ No If yes, provide explanation _____ **Emergency Contact** First Name _____ Middle Initial ____ Last Name ____ Address City, State, Zip Code Relationship _____ Phone Number Personal References First Name _____ Middle Initial ____ Last Name ____ Address City, State, Zip Code _____ Phone Number _____

First Name _____ Middle Initial ____ Last Name ____



Address
City, State, Zip Code
City, State, Zip Code Phone Number
It is against the law to discriminate against any person in the terms, conditions or privileges or rental of a dwelling, or in the provision of services or facilities in connection with such dwelling, because of race, color, religion, sex, handicap, familial status or national origin. State and local laws may protect additional classes from housing discrimination. Applicant authorizes the verification of all statements and information provided in this application including rental history, current and previous employment and income, bank and credit account details and any other relevant information necessary for Landlord to evaluate
this application. If Applicant has provided any false or incomplete information in this application, Landlord may reject this application and/or terminate the lease agreement.
Application Fee (Check one) There is NO application fee. Applicant will pay a non-refundable application fee in the amount of \$ for Landlord's review and verification of the statements and information contained in this application.
Applicant certifies that all statements provided in this Lease Application are true, correct and complete.
Applicant Signature
Date
Landlord Signature
Date

