**Rental Inquiry**

Dear potential lessee, please submit the form below and lessor will contact you. Note: Do not use the rental for animals, tobacco, alcohol, or drugs.

**\* Required**

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| **\* Please briefly describe what you are renting the space for?**  (Description of proposed use) | | |
| **\* In the list below, please answer yes/no.** | **Yes** | **No** |
| Do you need exclusive use of office? |  |  |
| Do you need to receive guests? |  |  |
| Do you need furniture? |  |  |
| Do you need a conference room (rate $35/hour)? |  |  |
| Do you need a receptionist? |  |  |
| Do you need a telephone? |  |  |
| Do you need a fax machine? |  |  |
| Do you need photocopying? |  |  |
| Do you need electricity? |  |  |
| Do you need heat? |  |  |
| Do you need air conditioning? |  |  |
| Do you need the kitchen? |  |  |
| Do you need a bathroom? |  |  |
| Will you do office cleaning? |  |  |
| Will you have tenant's insurance? |  |  |
| Will you agree to waive lessor's liability? |  |  |
| **\* What is your name?**  (Lessee's name) | | |
| **\* How would you like to be contacted?**  (Please provide either a phone number and/or an email address) | | |
| When is the best time to contact you? | | |
| \* **Which property are you planning to rent?**  1201 Bethlehem Pike, Flourtown, PA  6 Rose Ln, Flourtown, PA  50 S. 16th St., Unit 4010, Philadelphia, PA | | |
| \* **When do you need to start using the rented space?**  (dd/mm/yyyy) | | |
| How long do you plan to rent the space for?  (Term of rental) | | |
| \* **How long of an advance notice will you provide before you terminate the contract?**  Two weeks One month Two months | | |
| What is your proposed rent ($ per use, hour, day, week, or month)?  (Note: Lessor will make final decision on rent terms.) | | |
| Please add any final comments/questions. | | |

**Rental Application Form** (page 1)

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| (Licensee) hereby states that with respect to this property (describe property),  I am acting in the following capacity: (check one)  (i) Owner/Landlord of the Property; OR  (ii) A direct employee of the Owner/Landlord; OR  (iii) An agent of the Owner/Landlord pursuant to a property management or exclusive leasing agreement.  (Consumer) I acknowledge that I have received this Notice:  Date:  Consumer (print name): (sign):  Address:  Phone number:  (Licensee) I certify that I have provided this Notice:  Date:  Licensee (print name): (sign):  Address:  Phone number: |

**Rental Application Form** (page 2)

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| **PERSONAL INFORMATION** |
| Applicant's Full Name  Social Security No. Date of Birth  Driver's License (number) (state)  Dependent Children  (name) (date of birth)  (name) (date of birth)  (name) (date of birth)  (name) (date of birth)  (name) (date of birth)  (name) (date of birth) |
| **RESIDENCE HISTORY** |
| Present Address  Present Address Since (date)  Telephone Email address  Present Landlord or Mortgage Co.  Landlord or Mortgage Telephone  Landlord or Mortgage Address  Monthly Payment $  Reason for Moving  Previous Address  At Previous Address From (date) To (date)  Monthly Payment $  Previous Landlord or Mortgage Co.  Landlord or Mortgage Telephone  Landlord or Mortgage Address  Monthly Payment $  Reason for Moving |
| **EMPLOYMENT INFORMATION** |
| Present Status: Employed Full-Time Part-Time Unemployed Retired  Present Employer (or most recent):  Employer Address  Employer Telephone  Employed From (date) To (date)  Position Held Department  Supervisor Gross Monthly Income $  Other Income (bonus, commission, etc.) $  Previous Employer:  Employer Address  Employer Telephone  Employed From (date) To (date)  Position Held Department  Supervisor Gross Monthly Income $ |

**Rental Application Form** (page 3)

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| **BANKING AND CREDIT INFORMATION** |
| Bank Name & Branch  Bank Telephone  Account No. (checking) (savings)  Loan Account No. Monthly Payment $  Have you or co-applicant ever:  Been sued for non-payment of rent? yes no  Been evicted or asked to move out? yes no  Broken a rental agreement or lease? yes no  Been sued for damage to rental property? yes no  Declared bankruptcy? yes no  If you answered YES to any of the above, please explain.      Desired monthly rental payment (or range) $ |
| **OTHER INCOME** |
| If there are other sources of income you would like us to consider, please list income, source and person (Banker, Lawyer, Employer, etc.) who we could contact for confirmation. Please describe your income (alimony, child support or support maintenance). Income need not be revealed if you do not wish to have it considered as a basis for paying your rental obligation. If you wish for this type of income to be considered, please provide us with a copy of a court order or written agreement detailing such income.  Amount $ Per Source Telephone  Amount $ Per Source Telephone |
| **CO-APPLICANT INFORMATION** |
| Co-Applicant's Full Name  Address  Telephone Email address  Social Security No. Date of Birth  Driver's License (number) (state)  Present Landlord or Mortgage Co.  Landlord or Mortgage Telephone Address  Monthly Payment $  Reason for Moving  Co-Applicant's Present Employer (or most recent):  Employer Address Telephone  Employed From (date) To (date)  Position Held Supervisor  Gross Monthly Income $ Other Income $ |

**Rental Application Form** (page 4)

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| **OTHER INFORMATION** |
| **Bedrooms:**  Number of bedrooms needed  Other needs    **Pets owned by you or other occupants:**  Number of pets Kind of pet Breed Weight Age        Total number of pets  *Note: A $375.00 pet deposit, per pet, is required in addition to the security deposit. A maximum number of two pets are allowed.*  **Vehicles:**  Total number of vehicles (including company vehicles)  Make/Model Year Color Tag No. / State  Make/Model Year Color Tag No. / State  Make/Model Year Color Tag No. / State  Other car, motorcycle, etc.  **In case of personal emergency, notify:**  Name Relationship  Address  Home phone Work phone  Name Relationship  Address  Home phone Work phone |

**Rental Application Form** (page 5)

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| **AUTHORIZATION** |
| PLEASE READ CAREFULLY BEFORE SIGNING. |
| This is a preliminary application and does not obligate the lessor or the lessor's agent to execute a lease or deliver possession of the proposed or any other premises. To hold a house, payment of a deposit equal to one month's rent and all application documentation is required. **APPLICANT(S) SHALL BE ENTITLED TO A REFUND OF THE DEPOSIT ONLY IF MBEAUTYMAN 1.) RECEIVES A CANCELLATION NOTICE IN WRITING WITHIN FIVE (5) CALENDAR DAYS OF RECEIPT OF THE DEPOSIT OR 2.) GIVES WRITTEN NOTIFICATION THAT THIS APPLICATION IS DENIED.** Once an applicant is approved, the deposit will be applied to the security deposit pursuant to the terms of the lease.  Application may be denied for any of the following reasons: unfavorable or insufficient credit history; unfavorable landlord or employment reference(s); insufficient income to support the lease payments; inaccurate or falsified information submitted on the application; and/or the number of occupants exceeds the property's limit. A fee of $35.00 is charged for the first applicant and a fee of $10.00 is charged for each co-applicant by MBeautyman to obtain credit histories. This fee is non-refundable.  Pursuant to the Human Relation Act of Pennsylvania (P.L. 744 as amended), it is an unlawful discriminatory practice to discriminate against a prospective occupant or user in the terms or conditions of leasing any housing accommodation or commercial property, or to elicit information, make or keep any record or use a form of application containing questions regarding race, color, religious creed, ancestry, sex, national origin, handicap or disability, age or familial status.  I / We the undersigned acknowledge that all information given in this application is true and correct and that falsified statements herein are grounds for termination of Lease. I / We hereby authorize the verification of the information contained herein, including but not limited to obtaining information from employers, landlords, personal references, banks and credit bureaus. I / We further attest to being 18 years old and of legal age to enter into a contract.  I / WE HAVE READ AND AGREE TO THE PROVISIONS AS STATED ABOVE.  APPLICANT  DATE  CO-APPLICANT  DATE |

**LANDLORD VERIFICATION**

Date

Dear

(name) has applied for a rental property belonging to our company in Philadelphia. As part of the approval process, it is necessary that we receive a verification of tenancy from his/her current or previous landlord. Please complete the questions at the bottom of this form. Kindly return the form via fax to or phone your response to me at . The applicant has already signed this form to authorize the release of the requested information. Thank you very much for your assistance.

Sincerely,

M J Beautyman

Property Owner

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I authorize the release of the information below to MBeautyman, Owner/Agent for the purpose of determining my eligibility to rent a house or apartment.

Date Signature

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1. Length of tenancy

2. Monthly rent amount $

3. Did tenant pay the rent on time?

4. Do you know of any damages or other problems created by this tenant?

5. Would you lease a house/apartment to this tenant again in the future?

6. Your Name, Signature, and Title

**EMPLOYMENT VERIFICATION**

Date

Dear

(name) has applied for a rental property belonging to our company in Philadelphia. As part of the approval process, it is necessary that we receive a verification of employment from his/her current or previous employer. Please complete the questions at the bottom of this form. Kindly return the form via fax to or phone your response to me at . The applicant has already signed this form to authorize the release of the requested information. Thank you very much for your assistance.

Sincerely,

M J Beautyman

Property Owner

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I authorize the release of the information below to MBeautyman, Owner/Agent for the purpose of determining my eligibility to rent a house or apartment.

Date Signature

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1. Date of hire

2. Monthly salary $

3. Other compensation $

4. Is employment: Full-time Part-time Permanent Temporary .

5. Likelihood of continued employment

6. If party is no longer employed: Termination date

7. Reason of termination

Employer

Title

Date

**AUTHORIZATION AND UNDERSTANDING STATEMENT**

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| Applicant's Full Name  Social Security No. Date of Birth  Driver's License (number) (state)  Address  City State Zip  I authorize management or its security agent, Cavalier Property Services, Inc., to contact either orally or in writing any third parties to obtain information which this company or its security agent deems necessary and appropriate in verifying my application. I specifically authorize this company or its designated agent to obtain from any **state or local enforcement agency** to include US Military authorities concerning my conduct, including records of any **Criminal History Record** information and **Motor Vehicle Records**.  Applicant Signature |

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| **FOR OFFICE USE ONLY**  Date received:  Agent:  Date of application:  Desired Move-In Date:  Type and Size of Property Wanted:  How did you hear about our company?  Comments: |