

RENTAL APPLICATION

**EACH ADULT OVER 18 MUST COMPLETE A SEPARATE APPLICATION
WE WILL NOT REVIEW YOUR APPLICATION UNLESS IT IS COMPLETELY FILLED OUT.**

ITEMS NEEDED WHEN SUBMITTING YOUR APPLICATION:

- 1) **Proof of all income listed** 2) **Copy of ID and SS Card** 3) **\$20.00/ \$30.00 (2 people) Application Fee**

YOUR RENT PAYMENT WILL BE DUE ON THE 1st OF EVERY MONTH

All Leases are 18 to 22 Months/ Shorter Leases require Short Term Lease Fee

Once your application is approved, Security Deposit is due IN FULL to hold your rental and 1st Months rent is due IN FULL before you move in – NO EXCEPTIONS!

Did one of our current tenants refer you to our company? If so, who _____

Are you working with an agent? If so, who _____

of Bedrooms Required: _____ # of Bathrooms Desired : _____ Amount You Want to Pay In Rent: \$ _____ Month

Locations / Property Desired: _____

Special Features Desired: _____

How did you find out about us? Sign _____: Newspaper _____: Online: _____ Friend _____: Other _____

Date you want to move in: _____ Will you pay rent on time and not damage the property? _____

Will you be using a Section 8 Voucher towards your rent payment? _____ If so, How Many Bedrooms? _____

How long do you plan on living in your next home, if it meets your needs? _____

Have you ever broken a lease? _____ Why? _____

Have you ever been evicted or asked to leave a property? _____ Why? _____

Have you ever refused to pay rent for any reason? _____ Why? _____

Have you ever lost a home to foreclosure? _____ If yes, what are the details _____

Have you ever filed for bankruptcy? NO _____ YES _____ Date _____ (if Yes, explain below) If yes, Chapter 7 or Chapter 13 ? Explain _____

If YES, has the bankruptcy been discharged? YES : NO : If YES, when discharged? _____

YOUR INFORMATION

Full Name _____ Phone (____) _____ Work Phone (____) _____

Cell Phone _____ Primary E-mail Address _____

Social Security Number ____-____-____ Driver's License # _____ State: _____ Date of Birth: _____

Present Address _____

City _____ State: _____ Zip: _____

How long have you been there? _____ Landlords Phone: (____) _____

Landlord/mgr's name _____

Why are you leaving? _____ Current Payment: \$ _____

Are you up to date with your current landlord? _____ if no, explain _____

Have you ever paid your current landlord late, if yes, why? _____

Previous Address _____

City: _____ State: _____ Zip: _____

How Long? _____ Landlord/mgr's name _____

Landlords Phone: (____) _____

Why did you leave? _____

#1 Employer or Source of Income: _____ Position: _____ Start Date? _____

Address _____ Phone: (____) _____

How much do you make a week (NET): \$ _____ How many hours a week do you work? _____

#2 Employer or Other Source of Income: _____ Position: _____ Start Date? _____

Address _____ Phone: (____) _____

How much do you make a week (NET): \$ _____ How many hours a week do you work? _____

Former Employer _____ Position: _____ How Long? _____

Address _____ Phone: (____) _____

Why did you leave? _____

HAVE YOU EVER BEEN CHARGED WITH A CRIME OR ARRESTED? YES or NO

IF YES, PLEASE EXPLAIN: _____

Please Note – This applies to all residents of the property, not just lease holders. We do run background checks! If no information is entered above, you are verifying that you have not been convicted of a crime. We may deny the application or evict at anytime if we find out you were not truthful.

Are you (or any other person residing with you) actively on parole or probation? (Circle One) **YES** or **NO**

If yes, Probation Officers Information is required: Name & Number _____

BANK INFORMATION:

Bank Name & Branch _____ Checking: ___ Savings ___ Loan ___ Approx. Balance \$ _____

LIST ALL OF YOUR CURRENT MONTHLY OBLIGATIONS BELOW (including alimony, child support, etc...):

Pay To: _____ Total Amount Due: \$ _____ Monthly Payment: \$ _____

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**** IF MORE SPACE IS NEEDED, ADD AN ADDITIONAL PAGE ****

PERSONAL REFERENCES - List two persons, other than your relatives, that we may contact to verify your application.

Name _____ Relationship _____ Phone: (____) _____
Address _____ City _____ State _____ Zip _____

Name _____ Relationship _____ Phone: (____) _____
Address _____ City _____ State _____ Zip _____

EMERGENCY - In an emergency you may contact (List two, other than spouse/roommate, nearest relatives first)

Name _____ Relationship _____ Phone: (____) _____
Address _____ City _____ State _____ Zip _____

Name _____ Relationship _____ Phone: (____) _____
Address _____ City _____ State _____ Zip _____

EMERGENCY PAYMENT INFORMATION - In the event of some emergency that would prevent you from paying rent when due, is there a relative, person, or agency that could assist you with rent payments?

1st Emergency Contact: _____

Relationship _____

Address _____

Phone# _____ 2nd Phone # _____

2nd Emergency Contact: _____

Relationship _____

Address _____

Phone# _____ 2nd Phone # _____

Do you currently have a savings account, line of credit, or charge card sufficient to cover one month's _____

OTHER INFORMATION

OTHER PERSONS (INCLUDING CHILDREN) WHO WILL LIVE IN THE PROPERTY

Name _____ Relation _____ Age _____

Name _____ Relation _____ Age _____

Name _____ Relation _____ Age _____

Pets: Name _____ Type _____ Weight ____ lbs. Name _____ Type _____ Weight ____ lbs.

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List all motor vehicles to be kept at the property:

MAKE	MODEL	COLOR	YEAR	LICENSE PLATE #	STATE	MONTHLY PAYMENT
_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	\$ _____
_____	_____	_____	_____	_____	_____	\$ _____

I declare that the application is complete, true and correct and I give my permission for anyone contacted to release the credit or personal information of the undersigned applicant to this company, at any time, for the purposes of entering into and continuing to offer or collect on any agreement.. I further authorize this company to verify the application information by contacting creditors, present or former landlords, employers and personal references, whether listed or not, at the time of the application and at any time in the future, with regard to any agreement entered into with this company. Any false information will constitute grounds for rejection of this application, or this company may at any time immediately terminate any agreement entered into in reliance upon misinformation given on the application.

Applicant _____

Date _____

If there are any blank spaces on this application we will not review it. Please go back and double check that it is filled out completely. Thank you!

You can submit this application several ways. They are listed below:

Drop applications off at: 4411 N. Front Street, Harrisburg 17110 - Mon – Fri 9-5

Fax it to us at: 717-303-3838 Attn: Meb Graves (Please remember a \$20.00 fee for the first adult applicant and a \$10 fee thereafter for each additional adult applicant must be sent by mail or brought into our office. After hours a dropbox is located on the rear of the property at the drive on side of our building.)

*** NOTE: If moving in within 10 days or less from making security deposit and/or 1st months rent payments, these payments must be in cash, money order, certified or cashiers check.**