

_____ Last Name	_____ Initial	_____ First Name	_____ Birthdate	_____ Social Security Number
_____ Last Name	_____ Initial	_____ First Name	_____ Birthdate	_____ Social Security Number

LOCATION OF RENTAL UNIT: 447 Sharon Road, Moon Township, PA 15108

Apt. No. _____ Monthly Rent \$ _____ Security Deposit and or Non-Refundable Fee \$ _____

Plus Utilities checked: **GAS** **ELECTRIC** **WATER** **SEWAGE** **GARBAGE REMOVAL**

LIST NAMES OF PERSONS TO RESIDE IN RENTAL UNIT

Adults (18 years of age or older)	Children (under 18 years of age)
_____	_____
_____	_____

IMPORTANT:

Section 1 Read this section carefully before you complete and submit this rental application. You understand you must be qualified as an acceptable tenant before a lease agreement is signed by you and the Landlord. Before you are accepted as an applicant you agree the Landlord may:

- (1) Investigate the information you give in this rental application.
- (2) Investigate any other information learned from the investigation of this application.
- (3) Determine if you were ever arrested for any criminal activity.
- (4) Use a credit bureau to determine your credit payment history.
- (5) Verify all wages and other income.
- (6) Contact present and previous landlords to determine promptness of rental payments, housekeeping habits, any damage caused by you and your invitees and other lease violations.

Section 2 Other Considerations

- (a) You do not have any pets and must obtain written consent of the landlord before any pet is brought in to the rental unit.
- (b) The Security Deposit shall be held applicable to the Laws of the Commonwealth of Pennsylvania and shall not be used by the tenant as the final lease agreement payment for any other lease agreement payment in part or in whole.
- (c) You forfeit the Security Deposit if you fail to enter into a lease agreement within 48 hours of being notified you have been accepted as a tenant.
- (d) If you are not accepted as a tenant, the Security Deposit will be refunded to you.

ACCEPTED BY: APPLICANT (1) _____ **DATE** _____

APPLICANT (2) _____ **DATE** _____

PRESENT ADDRESS

Street _____ City _____ State _____ Zip _____ Telephone No. _____

Rent \$ _____ Date Lease Expired _____ Time at Address _____ years _____ months

PRESENT LANDLORD: Name _____ Street _____

City/State/Zip _____ Telephone No. _____

PREVIOUS ADDRESSES AND LANDLORDS (Last 5 Years)

1. Street _____ City _____ State _____ Zip _____ Telephone No. _____

Rent \$ _____ Date Lease Expired _____ Time at Address _____ years _____ months

LANDLORD: Name _____ Street _____

City/State/Zip _____ Telephone No. _____

2. Street _____ City _____ State _____ Zip _____ Telephone No. _____

Rent \$ _____ Date Lease Expired _____ Time at Address _____ years _____ months

LANDLORD: Name _____ Street _____

City/State/Zip _____ Telephone No. _____

PRESENT EMPLOYER

Name _____ Street _____ City/State/ Zip _____
Telephone # _____ Occupation _____ Length of Employment _____
Gross Pay Monthly _____ Net Pay Monthly _____ Are you laid off? Yes [] No []

PREVIOUS EMPLOYER (IF LESS THAN ONE YEAR WITH PRESENT EMPLOYER)

Name _____ Street _____ City/State/ Zip _____
Telephone # _____ Occupation _____ Length of Employment _____

SPOUSE/CO-APPLICANT EMPLOYER

Name _____ Street _____ City/State/ Zip _____
Telephone # _____ Occupation _____ Length of Employment _____
Gross Pay Monthly _____ Net Pay Monthly _____ Are you laid off? Yes [] No []

PREVIOUS EMPLOYER (IF LESS THAN ONE YEAR WITH PRESENT EMPLOYER)

Name _____ Street _____ City/State/ Zip _____
Telephone # _____ Occupation _____ Length of Employment _____

OTHER MONTHLY INCOME Social Security \$ _____ SSI \$ _____ Pension \$ _____ U. E. Comp \$ _____
Workmen's Comp \$ _____ Welfare \$ _____ Food Stamps \$ _____ Alimony \$ _____ Child Support \$ _____ Other \$ _____

ADDITIONAL INFORMATION

No. of Dependent children _____ Total Dependents _____ Applicant Marital Status: Married Unmarried Separated
Have you been denied credit within the past 12 months? Yes [] No []
Have you been delinquent in rent more than 30 days? Yes [] No []
Have you been delinquent with any creditor more than 60 days? Yes [] No []
Has any landlord filed an eviction action against you? Yes [] No []
Have you ever been arrested for criminal activity? Yes [] No []

AUTOMOBILE

Make _____ Model _____ Year _____ Plate # _____ Driver's License. No. _____
Make _____ Model _____ Year _____ Plate # _____ Driver's License. No. _____

NEAREST RELATIVE

Name _____ Street _____
City/ State/ Zip _____ Telephone # _____ Relationship _____

HOW DID YOU HEAR ABOUT SHARON PARK MANOR?

- SHARON PARK APARTMENTS.COM []
FOR RENT.COM []
FOR RENT MAGAZINE []
REFERRAL FROM FRIEND: []
SIGNAGE ON SHARON ROAD []