# **RENTAL APPLICATION**

## **Equal Housing Opportunity**

## Please complete and email. fax. deliver or mail to:

Professional Housin C/O Horell Ho 2900 Plank R Altoona, P 814-283-47( 866-798-9 info@altoona-	oldings, LLC coad, Suite 6 PA 16602 02 (phone) 137 (fax)	LLC
The undersigned hereby makes an application	to rent the fo	llowing
Anticipated move date ofat a monthly ren	nt of \$	and security deposit of \$
PLEASE TELL US ABOUT YOURSELF:		
Full Name		
Home Phone ()		
Date of Birth		
Social Security #		
Email Address:		
Other Phone ()		
Co-Applicant Name		
Names of Dependents		
Co-Applicant Date of Birth		
Social Security #		
Dependents Date of Birth:		
List All Pets		
PLEASE GIVE RESIDENTIAL HISTORY (LAST 3 )	YEARS):	
Current Address	-	City
State Zip Month/Year Moved In		
Reasons for Leaving		
Owner/Agent		
Phone ()		
Previous Address (last 3 years)		
Owner/Agent		
Phone ()		
PLEASE DESCRIBE YOUR CREDITHISTORY:		
Have you declared bankruptcy in the past seven (7)	years?	Yes No

,	ental payments in t	no puoryour.	Yes	No
Have you ever been evicted from	n a rental residence	?	Yes	No
LEASE PROVIDE YOUR EMPL	OYMENT INFORM	MATION:		
/our Status: Full Time	Part Time	Student	Unemployed	
mployer	Da	ates employed		
mployed as				
Supervisor Name				
Phone (				
(If employed by above less than	-	-		lover or school )
If you have other sources of inco	ome that you would	d like us to con	sider, please lis	st income, source,
and person (banker, employer, e	-		-	
reveal alimony, child support, or				
application.				
Amount \$	Source/Contact			
Name				
	NCES:			
Banking Accounts:				
Banking Accounts:				
Banking Accounts: Name Type of Account				
Banking Accounts: Name Type of Account Account Number				
Banking Accounts: Name Type of Account Account Number Personal Reference or Emerge	ency Contact:			
Banking Accounts: Name Type of Account Account Number Personal Reference or Emerge	ency Contact:			
Banking Accounts: Name Type of Account Account Number Personal Reference or Emerge Name Phone	ency Contact:			
Banking Accounts:   Name   Type of Account   Account Number   Personal Reference or Emerge   Name   Phone   Driver's License:	ency Contact: Address Relationship_			
Banking Accounts:         Name	ency Contact: Address Relationship_			
Banking Accounts:         Name	ency Contact: Address Relationship_	_State		
PLEASE LIST YOUR REFERENT         Banking Accounts:         Name	ency Contact: Address Relationship_	_State		

Day Phone #\_\_\_\_\_

Night Phone #

I hereby apply to lease the above described premises for the term and upon the set conditions above set forth and agree that the rental is to be payable by the 15th day of each month. As an inducement to the owner of the property to accept this application. I warrant that all statements above set forth are true.

I recognize that as a part of your procedure for processing my application, an investigative consumer report may be prepared whereby information is obtained through personal interviews with others with whom I may be acquainted. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living.

The above information, to the best of my knowledge, is true and correct.

Please sign:

Χ\_\_\_\_\_

Name of Applicant

Date

#### **AUTHORIZATION Release of Information**

I authorize an investigation of my credit, tenant history, banking and employment for the purposes of renting a house, apartment, or condominium from this owner/manager.

Name (please print)

Signature

Date

### APPLICANT: PLEASE DO NOT WRITE BELOW (FOR OFFICE USE ONLY)

Deposit of \$\_\_\_\_\_Received by \_\_\_\_\_

Date \_\_\_\_

OFFICE NOTES: