

RENTAL APPLICATION

Applicant Information			
Full Legal Name			Phone
Social Security Number	-	-	Date of Birth
Driver's License / ID No.			State

Residential Information					
<i>(five year history, additional space on reverse if needed)</i>					
Current Address			Previous Address		
City	State	Zip	City	State	Zip
Landlord Name			Landlord Name		
Landlord Phone ()			Landlord Phone ()		
Reason For Moving:			Reason For Moving:		
From	To	Monthly Rent \$	From	To	Monthly Rent \$
Was your name on the lease? <input type="checkbox"/> Yes <input type="checkbox"/> No			Was your name on the lease? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you given written notice to leave? <input type="checkbox"/> Yes <input type="checkbox"/> No			Have you ever give written notice to leave? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Did you rent or own this residence? (circle one) RENT OWN			Did you rent or own this residence? (circle one) RENT OWN		

Employment Information					
<i>(five year history, additional space on reverse if needed)</i>					
Current Employer			Previous Employer		
Address			Address		
Phone			Phone		
Supervisor			Supervisor		
Position			Position		
From	To	Monthly Income \$	From	To	Monthly Income \$

Your Personal History (circle YES or NO)					
<i>Have you ever?</i>					
been asked to move out or evicted?.....	YES	NO	broken a rental agreement or lease?.....	YES	NO
declared bankruptcy?.....	YES	NO	been sued for nonpayment of rent?.....	YES	NO
been sued for damage to a rental unit?.....	YES	NO	been convicted of a felony?.....	YES	NO
been convicted of selling, distributing or manufacturing illegal drugs?.....	YES	NO		YES	NO

References (must not be close friend or family)				
Name	Address: Street, City, State, Zip Code	Length of Acquaintance	Occupation	Phone Number
1.				
2.				

Other Income Source (additional space on reverse if needed)			
<i>(Alimony, child support, or Social Security income need not be revealed if Applicant does not wish to have it considered as a basis for paying this obligation.)</i>			
Source	Monthly \$	Source	Monthly \$

The Pennsylvania Human Relations Act intends to preserve the right to freedom from discrimination in public accommodations, housing accommodations, places of employment and commercial property.
 The Pennsylvania Human Relations Act prohibits discrimination of persons because of age, ancestry, color, disabilities, familial status, national origin, race, religion, or sex.

AUTHORIZATION

I hereby state and represent that the information in this application is complete and accurate. I understand that in the event a lease is entered into it may be cancelled by the Landlord if any of the information provided in the application is materially inaccurate or incomplete. I hereby authorize the Landlord or Landlord's representative's to verify the information on the application. Verification or re-verification of any information contained in the application will be retained by the Landlord. I hereby authorize Heritage Home Rentals to obtain information about me, including, but not limited to, this application, my credit, my tenant history, my check writing history, any court records and/or my criminal record, and I hereby authorize & instruct any entity or person contacted by Heritage Home Rentals, the Landlord or Landlord's agents to release such information to them.

I HAVE READ AND ACKNOWLEDGE THIS PROCEDURE FOR SUBMITTING AN APPLICATION

Applicant _____ Date _____

Other Residents
(list the legal names and ages of ALL other people who will occupy this residence)

Name	Age	Name	Age
Name	Age	Name	Age
Name	Age	Name	Age

Pets

Name	Breed	Age
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In Case of Emergency

Name of Contact	Relationship	Phone
Name of Contact	Relationship	Phone

Current Financial Obligations Per Month

Name of Collector	Amount	Name of Collector	Amount
1.		6.	
2.		7.	
3.		8.	
4.		9.	
5.		10.	

Additional Income Source *(additional space on reverse if needed)*
(Alimony, child support, or Social Security income need not be revealed if Applicant does not wish to have it considered as a basis for paying this obligation.)

Source	Monthly \$	Source	Monthly \$
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Additional Residential Information

Previous Address	City	State	Zip	Previous Address	City	State	Zip						
Landlord Name	Landlord Name	Landlord Phone ()	Landlord Phone ()	Reason For Moving:	Reason For Moving:	From	To	Monthly Rent \$	From	To	Monthly Rent \$		
Was your name on the lease?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Was your name on the lease?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you given written notice to leave?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Have you given written notice to leave?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Did you rent or own this residence? (circle one)	RENT	OWN	Did you rent or own this residence? (circle one)	RENT	OWN

Additional Employment Information

Previous Employer	Previous Employer	Address	Address	Phone	Phone	Supervisor	Supervisor	Position	Position	From	To	Monthly Income \$	From	To	Monthly Income \$
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ADDITIONAL COMMENTS

OFFICE PHONE: 570-274-8164 **HERITAGE HOME RENTALS** FAX: 717-850-0192