



PO Box 10
Sadsburyville, PA 19369
610-857-0800

Today's Date: _____ **Desired Move In Date:** _____

Desired Number of Bedrooms: _____ Do you **need** to be on the first floor:

SECTION 1: RENTAL PROPERTY (COMPLETED BY LEASING AGENT)

Property Address: _____ Date: _____

Application Fee: \$40 per application, Payable to Lafayette Square LP

SECTION 2: APPLICATIONS AND PROPOSED OCCUPANTS

APPLICANT:

Name: _____ Social Security #: _____ DOB: _____

Cell Number (_____) _____ Other Phone (_____) _____

Present Home Address: _____

City: _____ State: _____ ZIP: _____

Email: _____ Dates of Occupancy: _____

Landlord's Name & Phone (if applicable): _____

Monthly Rent or Mortgage Payment: _____

Previous Home Address: _____

City: _____ State: _____ ZIP: _____

Email: _____ Dates of Occupancy: _____

Landlord's Name & Phone (if applicable): _____

Contact in Case Of Emergency: _____ **Phone (_____)** _____

CO-APPLICANT:

Name: _____ Social Security #: _____ DOB: _____

Cell Number (_____) _____ Other Phone (_____) _____

Present Home Address: _____

City: _____ State: _____ ZIP: _____

Email: _____ Dates of Occupancy: _____

Landlord's Name & Phone (if applicable): _____

Monthly Rent or Mortgage Payment: _____

Previous Home Address: _____

City: _____ State: _____ ZIP: _____

Email: _____ Dates of Occupancy: _____

Landlord's Name & Phone (if applicable): _____

Contact in Case Of Emergency: _____ **Phone (_____)** _____

OTHER APPLICANTS:

Other Occupant's Name: _____ Relationship: _____

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PETS:

Do you have any pets: Y / N (circle one) If so Type: _____ Weight: _____

*Please note that Lafayette Square restricts certain breeds including
Pit Bull Terrier, Doberman, Rottweiler and German Shepherds*

Do you use or plan to use liquid-filled furniture Y / N (circle one) If so: Type: _____

SECTION 3: EMPLOYMENT

APPLICANT:

Current Employer: _____ Address: _____

Employment Dates: _____ Supervisor's Name: _____

Phone (_____) _____ Salary: _____ Position: _____

Full-Time or Part-Time (circle one)

Previous Employer: _____ Address: _____

Employment Dates: _____ Supervisor's Name: _____

CO-APPLICANT:

Current Employer: _____ Address: _____

Employment Dates: _____ Supervisor's Name: _____

Phone (_____) _____ Salary: _____ Position: _____

Full-Time or Part-Time (circle one)

Previous Employer: _____ Address: _____

Employment Dates: _____ Supervisor's Name: _____

SECTION 4: OTHER INCOME

Do you receive any additional forms of income like social security, pension or retirement funds?
Alimony, child support or separation maintenance income need not be revealed if you do not wish
to have it considered as a basis for paying this obligation

Applicant: _____ Source: _____ Monthly Amount: _____

Co- Applicant: _____ Source: _____ Monthly Amount: _____

SECTION 5: MOTOR VEHICLES

Applicant: _____ Model & Year: _____ Color: _____

License Plate # & State _____ Driver's License # _____

Co- Applicant: _____ Model & Year: _____ Color: _____

License Plate # & State _____ Driver's License # _____

SECTION 6: OTHER FINANCIAL, CREDIT AND MEDICAL INFORMATION

APPLICANT

CO-APPLICANT

- | | | | | |
|-------------------------------------|------------------------------------|-------------------------------------|------------------------------------|---|
| <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> yes | <input type="checkbox"/> no | 1. Do you have any outstanding judgments? |
| <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> yes | <input type="checkbox"/> no | 2. Have you in the last 7 years declared bankruptcy, suffered a foreclosure, had an account assigned for collection action or had any legal action affecting your ability to finance? |
| <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> yes | <input type="checkbox"/> no | 3. Have you ever been convicted of a felony? |
| <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> yes | <input type="checkbox"/> no | 4. Have you ever been convicted of a drug or criminal offense? |
| <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> yes | <input type="checkbox"/> no | 5. Have you ever been more than 7 days late paying rent in the last 3 years? |
| <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> yes | <input type="checkbox"/> no | 6. Have you ever refused to pay rent for any reason? |
| <input type="checkbox"/> yes | <input type="checkbox"/> no | <input type="checkbox"/> yes | <input type="checkbox"/> no | 7. Do you have any medical conditions that may require modifications to the unit or property in order to occupy it? |

If yes to any question, please explain: _____

SECTION 8: PLEASE READ CAREFULL BEFORE SIGNING

The undersigned represent that the information contained in this Application is true, correct and complete. The undersigned hereby authorize the verification of the information in this Application, through means including but not limited to: (1) obtaining a credit report to be used in the application process and/or for collection purposes upon the termination of a lease; and (2) contacting current and former employers, landlords and banks; and (3) performing criminal background checks, reference checks and other background checks deemed appropriate with respect to the applicants and any or all prospective occupants; and (4) conducting judgment searches; and (5) contacting creditors, credit bureaus and any other sources deemed necessary to investigate applicant's creditworthiness and to verify the information in this Application.

The undersigned acknowledge that the Landlord is not obligated to execute a lease or deliver possession of the rental property. The undersigned further acknowledge that all application fees, deposits and fees for credit and criminal checks are NONREUNDABLE.

The undersigned further acknowledge that the inclusion of false information in this application shall constitute grounds for the rejection of this application and/or forfeiture of any reservation deposits, application fees and fees for credit and criminal background checks, and would also be a breach of any lease entered into between the applicant(s) and Landlord.

ANY PERSON OR FIRM IS AUTHORIZED TO RELEASE INFORMATION ABOUT THE UNDERSIGNED UPON PRESENTATION OF THIS FORM OR A PHOTOCOP OF THIS FORM OR UPON PRESENTATION OF A SEPARATE RELEASE FORM SIGNED BY THE APPLICANTS. APPLICANTS AGREE TO SIGN SUCH A RELEASE FORM IF ASKED TO DO SO BY LANDLORD OR ITS AGENT.

I HAVE READ AND UNDERSTOOD AND I HEREBY AGREE TO THE PROVISIONS, INCLUDING THE RELEASED AND AUTHORIZATIONS, AS STATED ABOVE.

applicant

date

co- applicant

date