LOVETT'S MANUFACTURED HOME PARK

Dennis & Laura Baker 367 Briar Lane, Corry, PA 16407 (814) 664-5493

RENTAL APPLICATION

Apt. No

Social Security #

Date of Birth

Occupation

To Applicant:

1. APPLICANTS

Property Address

Name

This application must be completed in full. If "None", so indicate. All items are subject to verification. A false or willfully omitted statement in this application will be grounds for its rejection, or cancellation of your lease at the option of landlord. This application must be accompanied by a non-refundable fee of \$20.00 per person, (FOR ALL PERSONS OVER 18 YEARS OF AGE) for processing and credit reports.

Applicant:									
Spouse:									
Maiden Name:					•		-		
Aliases:									
Home Phone Business Pho	ne	Marital Status		Drivers License # Pets (Special W			ritten Permission Required)		
Children's Names and Ages	ļ				ļ.				
Why are you moving?					Preser	nt Rent?	Utilities?		
2. LAST THREE RESIDENCES					1				
Address and Apartment #	ent # City, State, Zip			Date of Occupancy			Landlord's Name, Address, Phone #		
Present									
Previous									
Previous									
3. EMPLOYMENT Yo	our Supervisor's	Name							
Employer			Address and Phone #				Dates Worked		
Present	resent								
Previous	Previous								
4. EMPLOYMENT OF SPOUSE Spous	se's Supervisor's	Name				I.	I		
Employer			Address and Phone #				Dates Worked		
Present									
Previous									
5. LIST OF YOUR PROPERTY Which will be located on the rental premises		•			6. MONTHL	Y INCOME ***			
Items		Value		So	urce		Amounts		
Furniture	\$					\$			
Electronics		•							
Other	\$						\$		
Other	\$						\$		
Other	er \$				\$				
						Total	\$		
							· · · · · · · · · · · · · · · · · · ·		

7. LIST OF MOTOR VEHICALS	1	Total Number?									
Make	Ye	ear	(Color		Туре		License # and State			
8. CURRENT LOANS AND OBLIGATION	NS .										
Compa	ny or Person				Rea	son	Time	Left	Month	ly Amount	
									\$		
									\$		
									\$		
									\$		
O EINANCIAI DECEDENCES						Total \$					
9. FINANCIAL REFERENCES Name Address											
Bank											
Charge Account											
10. PERSONAL REFERENCES (NON-F/	AMILY MEMBE	RS)									
Name		•	tionship			Add	ress		Phone #		
Emergency Contact:											
11. GENERAL		•									
a. Have you received welfare assistance within the last two years?									YES 🗌	NO 🗌	
b. Have you received unemployment compensation within the last two years?									YES 🗌	NO 🗌	
c. Are you eligible for any Government Housing Subsidy?									YES 🗌	NO 🗌	
d. Have you ever been evicted for non-payment of rent or otherwise failed to meet your lease obligation?									YES 🗌	NO 🗌	
e. Have you ever been convicted of, pleaded guilty, or "no contest", to a felony (whether or not resulting in a conviction)?									NO 🗌		
f. Have you ever been convicted of, pleaded guilty, or "no contest", to a misdemeanor involving sexual misconduct (whether or not resulting in a conviction)? {If YES, itemize and explain in remarks}							or not	YES 🗌	NO 🗌		
12. REMARKS	•		,								
13. RENTAL INFORMATION How Did Yo	ou Hear About	This Rental Un	it?								
Classified Newspaper Ad	Recommendat	ion	Website			Saw Rental Un	it While Driving	Ву 🗌	Yellow Pag	ges	
Other:											
<u> </u>										_	
I CERTIFY THAT the above informati that additional information will be obta that my rent payment record, my performation performance in the payment and the performance in the performan	ained from the ormance of ru	Apartment As les and lease of	sociation of N	lorth	western Penn	isylvania, Inc.	, the Credit Bu	ureau, and otl	her sources.	I understand	
I understand that this application may rental unit will be refunded only if t lease agreement. ALL applicants, 18	his applicatio	on is rejected	by the Landl								
Print Name:					Signature:						
Print Name:					Signature:						