

Apartment Rental Application

	OFFICE USE ONLY:					
	Prospective Address: 1444 Hamilton St. Apt Allentown, PA 18102 Security Deposit: Monthly Rent:			Time Received: ved By: Points:		
	PLEA	SE FILI	IN A	LL FIELDS		
Tenaı	nt Information:					
	Name:			Desired Length of Occupancy:		
	Date of Birth:		Desire	Desired Date of Occupancy:		
	Social Security #:		Home	Home/Cell Phone :		
	Drivers License #:		_ Email	:		
Preser	nt Address :		I			
City:			_ State :	Zip :		
How 1	long have you lived at this addr	ess?				
Why a	nre you moving?					
Curre	nt Rent :	Current L	ease Expir	es:		
Preser	nt Landlord Name(s) :			Phone # :		
		5-year Res	sidential I	History		
	Address:	Start Date MM/YY:	End Date MM/YY:	Landlord Name/Phone #:		
1						
2						
3						
4						
5						

Apartment Rental Application (continued)

Financial Information

Current Job Position/Title:			
Employer Name :			
Business Address :			
Business Phone Number :			
Supervisor Name/Title/Phone:			
How long at current job?			
Gross Monthly Income:			
Source:		0	ocial Security Benefits vernment Assistance [] Child Support
Previous Employer Name/Phone:			
How long at previous job?			
Additional Occupant Informula Name:		ı	2. Name :
Date of Birth:			Date of Birth:
Social Security #:			Social Security #:
Relationship:			Relationship:
Occupation :			Occupation :
3. Name: Date of Birth :			4. Name :
Social Security #:			Social Security #:
Relationship:			Relationship:
Occupation:			Occupation:
Cecupation:			
Vehicle Information :			
Make:Model:_	Year:	Color:	License Plate#:
Make:Model:_	Year:	Color:	License Plate#:

Apartment Rental Application (continued)

Personal References:

Phone # :						
Relationship: Relationship: How long acquainted? How long acquainted? 4. Name:						
How long acquainted? How long acquainted? 3. Name: 4. Name :						
3. Name: 4. Name :						
Phone #:						
Thome ii.						
Address: Address :						
Relationship : Relationship :						
How long acquainted? How long acquainted?						
Rate your own cleanliness on a scale of 1(least) to 5(most): Do you smoke ? [] Yes [] No Have you ever been convicted of any crime? [] Yes [] No						
If yes, please explain:						
Have you ever been evicted from any tenancy? [] Yes [] No						
Have you ever filed a petition for bankruptcy? [] Yes [] No If yes, when:						
Have you ever willfully and intentionally refused to pay rent when due? [] Yes [] No)					
Do you know of anything which may interrupt income or ability to pay rent? [] Yes	[] No					
If yes, please explain:						
By signing below, I hereby certify that the answers I have given in this application are	true,					
correct, and complete to the best of my knowledge.						
Applicant Name (Printed):Signature :						

The Pennsylvania Human Relations Act prohibits discrimination in all housing transactions based on :Race, Color, National Origin, Religion, Sex Familial Status, Disability, Age, Ancestry, or Pregnancy

Please submit all applications to The Traylor Hotel rental office. The rental office phone number is (610) 434-1190. Thank you!