RESIDENTIAL LEASE APPLICATION

Independence Properties LLC
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This is a rental application; it is not a lease agreement. We reserve the right to modify application requirements at any time without notice. Any change or modification will not affect a previously approved applicant. A completed application is required from everyone over the age of 18 intending to live in the rental. A completed application includes submission of the following:

1. 3 forms of identification at least one with photo including; Driver's license, SS card, credit card, other
2. 3 most recent pay stubs
3. W2 form covering most recent tax year, and or disability payments and or other source of income verification. If self-employed – current and past 3 years schedule C tax form.
4. Payment of deposit or application fee;
   Note; Additional documentation and data verification may be required for approval.

Name First _____ M I_____ Last_____

Social Security_____Date of Birth_____

Driver's License Number_____State ____Home phone_____

Cell Phone_____ Work phone _____

Email_____

PROPERTY YOU WOULD LIKE TO RENT

Street_____House/apt#_____City_____State PA zip_____

RENTAL TERMS

Applicant(s) requests an occupancy date of: _____

Applicant(s) requests a rental period of: Year(s)_____months_____

MONTHLY RENTAL RATE AND DEPOSIT REQUIREMENTS

Refundable Security Deposit
(pay with application to save application fee – see last page) $_____

1st month's rent (due before move in) $_____

Last month's rent (due before move in) $_____
(may be paid during the 1st, 3 months of the lease – see page 4)

REASON FOR MOVING_____

HOW DID YOU HEAR ABOUT THIS RENTAL; (circle one)

Craigslist, Trulia, Zillow, Hot Pads, Apts.Com, Locators, Other_____

PRESENT ADDRESS

Street_____Apt #___City,_____state_____

□ Own □ Rent How long did you live there?_____

Landlord name _____Landlord phone _____

Landlord address _____City, State, Zip _____

Current monthly rent $ or, Current monthly mortgage $

Utilities $ Elec Gas Oil Water Sewer

PREVIOUS ADDRESS

Street _____Apt #___City, _____state_____

□ Own □ Rent How long did you live there? _____

Landlord name _____Landlord phone_____

Landlord address _____City_____State__ Zip_____

Reason for moving_____

EMERGENCY CONTACT in case(s) of emergency, please contact my nearest relatives not living in this rental

Name_____address_____

City_____state___Phone_____Relationship_____

Name_____address_____

City_____state___Phone_____Relationship_____

REFERENCES (people not living with you)

Name_____Street & #_____

city_____Phone_____Relationship_____

Name_____Street & #_____

city_____Phone_____Relationship_____

EMPLOYER _____

Position Title_____

Employer address_____City_____ State_____zip_____

Start Date of employment _____Total income _____yearly____monthly _____weekly

Supervisor_____Phone no._____

Total years at this employer or working in same career whichever is longer_____
Are you working from home? Y_____N_____ If so, how often? Days per week_____

MILITARY STATUS_____

OTHER INCOME: If applicant and or co-applicant are not employed – or do not meet income eligibility requirements - please indicate source of funds and or other income that will be used to pay this obligation.

REAL ESTATE OWNED OTHER THAN LISTED ABOVE

Street city state zip

BANK NAME, THE SOURCE OF WHERE YOU WILL OBTAIN MONEY DUE BEFORE MOVE IN

_____Amount in Checking $_____Amount in Savings $_____

MONEY YOU OWE TO OTHERS

Type of account	Name of creditor or bank		Monthly payment	Balance
Auto loan				
Auto loan				
Credit card				
Credit card				
Other payments				
Other payments				
Other payments				

___Yes ___No does the applicant owe any rent or fees to current and or past landlord(s)

___Yes ___No is applicant obligated to pay support under any order? If Yes, list monthly required payment

___Yes ___No has applicant ever been charged with and or convicted of a crime? If yes, please explain.

___Yes ___No has applicant ever been involved in an eviction notice? If yes, please explain.

___ Yes ___No has applicant ever willfully and intentionally refused to pay rent when due?

___Yes ___No does applicant own any real estate? If so please list the address(s),

___Yes ___No is applicant late on any utility bills? If so, list which ones and amounts due

OTHERS THAT WILL BE LIVING IN HOUSEHOLD:

Resident shall not allow anyone not listed on the application and lease to live at the Leased Premises for any period or purpose unless approved by Owner. Violation penalty includes loss of deposit and eviction

NAME_____DOB_____OCCUPATION_____

NAME_____DOB_____OCCUPATION_____

Use back of page if needed to list all residents

NUMBER OF SMOKERS _____(applicant confirms zero smokers if blank)

NUMBER OF ANIMALS _____TYPE (S)_____WEIGHT_____Use back of page

For animals trained to provide certain service(s), applicant shall provide with this application such documentation as required by and in compliance with THE GENERAL ASSEMBLY OF PENNSYLVANIA HOUSE ACT 118 AND a written plan to comply with all animal regulations with-in the jurisdiction of the rental property. NOTE; a person who misrepresents a disability or need for an assistance or service animal commits a misdemeanor of the third degree, which is punishable by up to 1 year in prison and a fine of up to $2,500. A verifier who misrepresents an animal as being a service or assistance animal commits a summary offense, punishable by a fine of up to $1,000.

VEHICLE INFORMATION

Make	model	Year	Color	License Number/State

POPULAR OPTIONAL SERVICES (if you don't see it – please ask)

1. WINDOW A/C UNITS (ONE INCLUDED IN EACH BEDROOM)
   PLEASE NOTE; insurance will not permit resident owned window ACs. Additional AC units are available for a monthly fee of 10.00 for one or 15.00 for 2. This will include spring installation, fall removal, and all maintenance repair or replacement as needed.
   Please add_____window A/Cs this to my lease agreement

2. ACCIDENTAL DAMAGE AND REPAIR WAIVER. In the event of accidental damage to the rental including, floor covering, appliances, fixtures, finishes, wiring and or other permanently installed items. We will waive the cost of repair or replacement up to 1,000.00. Resident will be responsible for repair or replacement in excess of 1,000.00. This does NOT include damage caused by pet(s) or smoking 15.00 per month with 50.00 co-pay per incident
   Please add this to my lease agreement YES_____NO_____

3. OVERSIZE SHOWER HEAD
   enjoy high-water volume relaxing shower 15/mo YES_____NO_____

4. PETS (minimum two-year lease required - not available at all locations)
   Pet Rents range from 35.00 to 50.00 with nonrefundable fee
   Please contact me about a Pet YES_____NO_____

5. FLAT SCREEN TV MOUNTING
   We can install your bracket for a flat screen TV on the wall of you choosing. 39
   YES_____NO_____

6. BALANCE DUE BEFORE MOVE IN
   please divide the last month's rent by 3 equal monthly payments. 25 service fee to each payment
   Please add this to my lease agreement YES_____NO_____

7. BUILDING ACCESS CONTROL SYSTEM (ACS) (not all locations)
   A unique pass code will be provided to manually unlock Main door. You may also select a convenient key FOB that will unlock the door automatically.
   One time non-refundable fee of 15.00 ea. 2 for 25.
   Yes Please add this to my lease agreement YES_____NO_____

8. STORAGE SPACE(not all locations)
   Yes, Please contact me about Storage options YES_____NO_____

9. RENTERS INSURANCE
   Insure your keep sakes with an inexpensive policy
   Yes, Please contact me about Renters Insurance YES_____NO_____

10. ADDITIONAL RESIDENT WATER/SEWER CHARGE (not all locations)
    Base rent covers up to one resident
    Please add _____additional residents

11. HOLD RENTAL OPEN FEE
    Please contact me about a 10 day Hold Rental Open Fee YES_____NO_____

12. SECOND CHANCE PROGRAM
    Bad credit can happen to good people. Under certain situations, bad credit can be offset

Please contact me about credit offset fee YES_____NO_____

APPLICANT AUTHORIZATION AND INSTRUCTIONS TO LANDLORD

Please note; application(s) cannot be accepted until all questions are accurately answered, and this form is completely filled in with all requested documents provided.

I, (the applicant) authorize and instruct the Landlord to proceed immediately with the following rental application procedures.

Choose one option 1, Or, 2

Application Fee Waived with Refundable Deposit

Option 1. Please waive the application fee - my payment of one month's rent is enclosed YES_____NO_____

Landlord may conduct a full employment/credit/criminal/eviction, and or personal reference check(s). When this application is accepted,

1. Landlord shall provide me with the first right of refusal – BEFORE offering rental to other(s).
2. Landlord is instructed to prepare a written lease in the form customarily used by the Landlord for my signature.
3. I agree to sign the lease agreement within three (3) days of my approved application. If I fail to sign a lease agreement with this Landlord in the time allowed, the Landlord may deduct $50 application fee, plus $350 lease preparation fee and offer rental to others.

This deposit shall be refunded if Landlord is unable to offer the rental to applicant for reason(s) other than false, incomplete, and or misleading information provided by or found out about the applicant.

Application Fee Paid

Option 2. Please accept my $50.00 nonrefundable application fee. YES_____NO_____

Landlord may conduct a full employment/credit/criminal/eviction, and or personal reference check(s). When this application IS accepted,

1. Landlord is instructed to notify me.
2. Landlord may continue to offer rental to all others without obligation to me

By signature below, I request that my application be reviewed for lease of the above-described premises and services.

- I read and understand English and agree to the above requirements/procedures and authorize Landlord to proceed as indicted above.
- I understand that providing false/misleading information will result in rejection of this application and loss of all money paid.
- I have income and or other financial resources necessary to complete the lease and service terms indicated above.

Applicant's Signature _____ Date_____

REMINDER

Partial or incomplete applications cannot be accepted. A completed application includes; submission of the following from each person 18 years or older:

1. 3 forms of identification at least one with photo including; Driver's license, SS card, credit card, other
2. 3 most recent pay stubs
3. W2 form covering most recent tax year, and or disability payments and or other source of income verification. If self-employed – current and past 3 years schedule C tax form.
4. Payment of deposit or application fee;

Payment Options

- Mail check or money order made payable to:
  Independence Property Management PO Box 322, Oley PA 19547
- Direct deposit of cash, check OR money order at any Wells Fargo Bank:
  Account name: Independence Property Management / Routing #031000503 / Account# 7894971881

- **NOTE: hand written signatures are difficult to read - PLEASE ALWAYS PRINT YOUR NAME CLEARLY ON DEPOSIT SLIP**

List of all rental communities or residences you have recently applied for

_____

_____

_____

Has your application ever rejected by a rental communities or residences? If so, why?

_____

_____

_____