

HICKORY HILLS APPARTMENTS

100 Arthur Drive Wexford, Pennsylvania 15090 (724) 935-2800 Fax (412) 318-6285

Rental Application

FOR OFFICE USE ONLY					
DATE					
PROPERTY					
APT. NO	RENT \$				
AGENT					

Please complete all requested information on the front and back of this form. Thank you for your interest in our apartments. Desired Date of Occupancy _____ Date of Application Type and Size of Apartment Wanted (No. of Bedrooms, etc.) PERSONAL INFORMATION APPLICANT'S FULL NAME ____ Date of Birth Social Security No. ______ Driver's Lic. No./State _____ E-mail _____ CO-APPLICANT'S FULL NAME ____ _____ Date of Birth _____ Social Security No. _____ Priver's Lic. No./State _____ Relationship ____ _____ Home Phone Full Names of All Other Residents Relationship to You Date of Birth How Many Pets Do You or Other Occupants Own? _____Kind of Pet, Breed, Weight _____ How Did You Hear About Our property? _____ Website ☐ Facebook ☐ Yelp ☐ Friend ☐ Apartment Rental Guide Book ☐ Online Apartment Link ☐ Other **RESIDENCE HISTORY** PRESENT ADDRESS _____ Present Telephone Dates From To _____ Telephone _____ Present Landlord or Mortgage Co. _____ Monthly Payment \$ _____ Reason for Moving _____ PREVIOUS ADDRESS _____ То Present Landlord or Mortgage Co. _____ ______ Telephone _____ Monthly Payment \$ _____ Reason for Moving ____ EMPLOYMENT INFORMATION _____ Dates From To PRESENT EMPLOYER _____ Telephone Employer's Address _____ Supervisor Gross Monthly Salary \$ ______ Dates From _____ To ____ PREVIOUS EMPLOYER Supervisor ____ CO-APPLICANT'S EMPLOYER ______ Dates From To ______ Telephone ______ Employer's Address _____ Supervisor Gross Monthly Salary \$_____

BANKING AND CREDIT REFERENCES

BANK NAME & BRANCH			Telephone	Telephone			
Checking Acct. No.			Savings Acct. No				
Loan Acct. No.			Monthly Payment \$				
CREDIT REFERENCE			Telephone	Telephone			
Address			Account No.				
CREDIT REFERENCE			Telephone	Telephone			
Address			_ Account No				
OTHER REFERENCE							
Address							
	0	THER INFOR	MATION				
TOTAL NUMBER OF VEHICLES (Including Company Vehicles)							
Make/Model	Year	Col	lor	Tag No./State			
Make/Model	Year	Col	lor	_ Tag No./State			
Other Car, Motorcycle, etc							
Total Gross Monthly Household Inco	ome \$						
If there are other sources of income y confirmation. You do NOT have to rev							
Amount \$	Per	Source		Telephone			
Amount \$	Per	Source		Telephone			
Been evicted or asked to r Been sued for damage to i			Broken a Rental Agreem Declared Bankruptcy?		∟lNo		
In Case of Personal Emergence	y, Notify		R	elationship			
Address	Address Home Phone				Work Phone		
I hereby make application for an certify that this information is a to contact any references that I authorize you to obtain my conform your credit reporting agents an inquiry on my file. Date Application Received	orrect. I authorize y have listed. I also sumer credit report cy, which will appe FOR OFF	CO-APPLICA CO-APPLICA DATE SIGN FICE USE ONLY – DC	ANT ED NOT WRITE BELOW Received By				
REFERENCE VERIFICATION	REMARKS		RECOR	RECORD OF PAYMENTS RECEIVED			
☐ Present Landlord			Date	Description	Amount		
☐ Previous Landlord							
☐ Employment							
☐ Co-Applicant Employ							
Bank			THIS APPLICATION: Approved Not Approved				
Credit (1)							
☐ Credit (2)				By Assigned to Apt. No Rent \$			
☐ Credit (3)				Apartment Address			
Other				Applicant Notified By			
· — · · ·		Anticipated Move-In Date					