

PerutoProperties.com

Clean and Safe Rental Homes

150 Monument Road - Suite 515

Fax Number:

Bala Cynwyd, PA 19004

215-925-1590

215-740-4900

APPLICATION



Date _____

Address applied for _____

What date would you like the lease to start _____

Last name _____ First Name _____ MI _____

Phone number _____ Work number _____

E-Mail address _____

DOB _____ Married _____ Single _____ Widowed _____ Divorced _____ Separated _____ How Long? _____

Social security number _____

Driver's address on license _____

Present home address _____ City _____ State _____

Zip _____ Own _____ Rent _____ Length of Time _____

Name of Landlord _____ Phone No. _____

Landlord's address _____

City/State _____ Monthly rental payment _____

Previous Address _____

Length of time _____ Monthly rental payment _____

Name of previous Landlord _____ Phone No. _____

Address _____ City _____ State _____ Zip _____

Employed by _____ Address _____

Position _____

Phone No. _____ Income _____ How long employed _____

Immediate Supervisor _____ Former Employer and Address (if employed less than 3 years) _____

OTHER INCOME:

Notice: Alimony, child support or separate maintenance need not be revealed if the Applicant does not choose to have it considered as income.

(please complete other side)

If a "yes" answer is given to any of the following questions explain.

QUESTIONS

- (a) Do you have any outstanding judgments?
- (b) Have you declared Bankruptcy in the past seven years?
- (c) Are you required to pay alimony, child support, or separate maintenance?
- (d) Have you ever been involved in a Landlord & Tenant action or an eviction action?
- (e) Do you or any other occupant smoke?
- (f) Do you own a pet?
- (g) Have you ever been arrested? If so, for what?

Personal Reference:

Name(Relative) _____ Relationship _____ Address _____
_____ City _____ State _____
Zip _____ Phone No. _____

Personal Reference:

Name (not related) _____ Relationship _____ Address _____
_____ City _____ State _____ Zip _____ Phone No. _____

Where did you find out about this apartment? _____ Number of people to reside in
apartment Adults _____ Children _____ Ages _____

Automobiles owned:

Make _____ Model _____ Year _____ Color _____

Registered Name _____ License No _____

Reason for moving:

I hereby certify that I am at least eighteen (18) years of age and that the information given is true and correct. If any information is found to be incorrect or missing then this application may be denied and any deposits paid to hold the unit will be forfeited.

Applicant hereby authorizes Landlord to check applicant's credit with a Credit Reporting Agency and with prior landlord, now, during and after tenancy to enable Landlord to enforce any judgments that may be obtained for non payment or breach of lease.

_____ (\$30 Application Fee - Non-Refundable)

Signature

Please fax completed application to **215-925-1590**

(jmb/building/rentalapplication)

(Revised 12-8-10)

PERUTO PROPERTIES, LLC.

Clean and Safe Rental Homes

150 Monument Road
Suite 515
Bala Cynwyd, PA 19004

Phone : 215-740-4900
Fax Number: 215-925-1590

EMPLOYMENT VERIFICATION

Name of Employee: _____

Name of Company: _____

Address: _____

Phone: _____

Immediate Supervisor's Name: _____

Employee's Department: _____ Badge No. _____

Income (weekly) Amount _____

How long employed: _____

Type of position held: _____

Is the Employee's job performance satisfactory: _____

Employer's Signature

Employer's Name (printed)

My employment information is required in connection with an application for rental and I hereby authorize the release of my employment information.

Date: _____

Employee's Signature

PERUTO PROPERTIES, LLC.

Clean and Safe Rental Homes

150 Monument Road
Suite 515
Bala Cynwyd, PA 19004

Phone: 215-740-4900
Fax Number: 215-925-1590

LANDLORD REFERENCE

TO: _____

Date: _____

Re: _____

The above person has applied for residency at _____
_____ and has indicated to us that you rented to him/her at
_____ from _____ to _____.

As indicated by the signature below, the applicant consents to the release of information pertaining to his/her rental history. We would greatly appreciate your cooperation in completing the questions below.

1. Are the dates of residency noted above correct? If not, during what period did you rent to him/her?
_____.

2. What was the monthly rental charge? _____

3. Has the resident ever been behind in the payment of the monthly rent? _____ If yes, how many times in the last 12 months? _____

4. The applicant's overall conduct while residing in the apartment would be considered:

_____ Excellent _____ Good _____ Fair _____ Poor
Please explain _____

5. If this resident moved and re-applied for housing in the future, would you rent to him/her again?

If not, why? _____

6. Additional Comments: _____

NAME OF PERSON COMPLETING FORM (Please Print)

X _____
SIGNATURE OF PERSON COMPLETING FORM

Phone Number

I hereby consent to the release of the above requested information :

Applicant's Signature

Date _____