RENTAL APPLICATION Poplar Partners 130 Carlisle Street, Hanover, PA 17331 (717) 633-9385 / Fax: (717) 225-0847

PERSONAL DATA								
NAME		SOCIAL SECURITY NU	UMBER					
DATE OF BIRTH:		DRIVERS LICENSE #	EXPIRES					
NAME OF CO-TENANT		SOCIAL SECURITY NU	UMBER					
DATE OF BIRTH:		DRIVERS LICENSE #	EXPIRES					
PRESENT ADDRESS								
CITY/STATE/ZIP		PHONE NUMBERS						
HOW LONG AT PRESENT ADDRESS	L	NDLORD	PHONE					
CURRENT RENT	P	AID THROUGH	CURRENT LEASE EXPIRES					
PREVIOUS ADDRESS	DATES RENTED L/ THROUGH	ANDLORD	PHONE					
CITY/STATE/ZIP								
			PETS?					
OCCUPANTS}			-					

EMPLOYMENT

	PRESENT OCCUPATION*	PRIOR OCCUPATION*	CO-TENANT'S PRESENT OCCUPATION*	CO-TENANT'S PRIOR OCCUP
OCCUPATION				
EMPLOYER				
SELF-EMPLOYED, DOING BUSINESS AS				
BUSINESS ADDRESS				
BUSINESS PHONE				
TYPE OF BUSINESS				
POSITION HELD				
NAME AND TITLE OF SUPERVISOR				
HOW LONG				
MONTHLY GROSS INCOME				

*If employed or self-employed less than two years,

give same information on prior occupation

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REFERENCES

BANK REFERENCE:			ADDRESS:	
ACCOUNT NO.	ADDRESS	HIGHEST AMOUNT OWED	PURPOSE OF CREDIT	ACCOUNT OPEN OR DATE CLOSED
INCE	ADDRESS	PHONE	LENGTH OF ACQUAINTANCE	OCCUPATION
VE	ADDRESS	PHONE	CITY	RELATIONSHIP
ACTS	ADDRESS	PHONE	CITY	RELATIONSHIP
	INCE	ENCE ADDRESS	ACCOUNT NO. ADDRESS HIGHEST AMOUNT OWED	ACCOUNT NO. ADDRESS HIGHEST AMOUNT OWED PURPOSE OF CREDIT Image:

Have you filed a petition for bankruptcy? _____ Have you ever been evicted from any tenancy? _____

Have you ever willfully and intentionally refused to pay any rent when due?

I DECLARE THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT. I AUTHORIZE ITS VERIFICATION AND THE OBTAINING OF CONSUMER CREDIT REPORT.

I agree that Landlord may terminate any agreement entered into in reliance on any misstatement made above.

ADMINSTRATIVE FEE

Applicant understands that there is no application fee unless accepted into property by Owner/Agent. In case the applicant is accepted into the property, there is a \$25.00 non-refundable fee that is due upon notification of acceptance.

APPLICANT: _____

CO-APPLICANT: _____

DATED: _____

DATED: _____