

APPLICATION FOR RENT

Waterford Management

POST OFFICE BOX 277

LANDISVILLE, PA 17538

(717)898-0878 Phone; (717)898-0879 Fax

SECTION 1. RENTAL PROPERTY (COMPLETED BY OFFICE)

Property Address _____ M/I Date _____ Application Fee: \$35 for Each Applicant and \$35 for Each Co-Applicant, Payable to: WATERFORD MANAGEMENT.

SECTION 2. APPLICANTS

APPLICANT

Name _____ Birthdate ____ / ____ / ____ S.S. No. _____

Home Phone No. (____) _____ Business Phone No. (____) _____ Cell Phone _____

Present Address _____

City _____ State ____ Zip ____ E-mail _____

Dates of Occupancy _____

Landlord's Name, Address and Phone _____

_____ Rental Rate _____

Previous Address _____ City _____ State ____ Zip ____

Dates of Occupancy _____

Landlord's Name, Address and Phone _____

_____ Rental Rate _____

Contact in Case of Emergency _____ Phone(____) _____

CO-APPLICANT

Name _____ Birthdate ____ / ____ / ____ S.S. No. _____

Home Phone No. (____) _____ Business Phone No. (____) _____ Cell Phone _____

Present Address _____

City _____ State ____ Zip ____ E-mail _____

Dates of Occupancy _____

Landlord's Name, Address and Phone _____

_____ Rental Rate _____

Previous Address _____ City _____ State ____ Zip ____

Dates of Occupancy _____

Landlord's Name, Address and Phone _____

_____ Rental Rate _____

Contact in Case of Emergency _____ Phone(____) _____

Other Occupants' Names and Ages _____

Pets Yes No Type _____

Do you use or plan to use liquid-filled furniture? Yes No Type _____

SECTION 3. EMPLOYMENT

APPLICANT

Employer _____ Address _____

Employment Dates _____ Supervisor's Name _____ Phone(____) _____

Salary _____ Full-time Part-time Retired Position _____

Previous Employer _____ Address _____

Dates of Employment _____

CO-APPLICANT

Employer _____ Address _____

Employment Dates _____ Supervisor's Name _____ Phone(____) _____

Salary _____ Full-time Part-time Retired Position _____

Previous Employer _____ Address _____

Dates of Employment _____

