NesqApts Rental Application

The undersigned he	ereby makes appli	cation to rent						
unit # locate	ed at	at Catawissa Street, Nesquehoning, PA 19240.						
Desired date of occ	cupancy is							
PERSONAL DATA								
	First Name	Date of Birth	Social Security Number	Phone Number				
List other occupant	ts and relationship	o to above (spouse,	daughter, cousin, friend, etc.)					
Last Name	First Name	Date of Birth	Social Security Number Rela	tionship				
DECIDENCE WATER	NDV							
RESIDENCE HISTO		dance for last 2 yes	are even if you were not on a l	0000				
		_	ars, even if you were not on a l	ease.				
			(Apt #) _ Present telephone					
			<pre>xpires(mo/yr)</pre> <pre>Landlord's phone number _</pre>					
	: \$		Landiord's phone number _ /ing:					
			(Apt #)					
City/State/Zip								
Move-in date(mo		Move-o						
			Landlord's phone number					
			/ing:					
ranount or none.	Ψ	Redden for me	,					
EMPLOYMENT RE	CORD: Two full yea	ars employment his	tory is required.					
CURRENT STATUS:	-		ent Unemployed Retire	ed				
Current Employer's			Position:					
								
			Your Work Phone No.					
Employment Start I	Date:	Gross I	Monthly Income:					

Previous Employer 's nam	ne:		_ Position:	-	
Employer's Address:					
Supervisor:	Phone No		Your Work Phone No		
Employment Start Date:	ployment Start Date: Gross Monthly Income:				
GUARANTOR/SUPPORT	DATA				
YOU WILL NEED A GUARA other source; 2) You are the unit for which you are roommates; or 3) Your m are applying, but you've b person(s) who have agre	employed, but you e applying or two (2 nonthly income is a been employed in t	ur income is less tha 2) times the amoun at least (3) times tha that job for less tha	an three (3) times the a t of the monthly rental e amount of the month n six months. Please in	amount of the mont rate if you will have ally rental rate of the	thly rental rate of e one or more e unit for which
Guarantor Last Name:		First Name:	Pho	ne:	
Address:		Cit	y/State/Zip:		
Employer:					
'WO PERSONAL REFERI		5 1 11 11	S.		
lame:					
ddress:					
lame:					
Address:					
WO EMERGENCY CONT	TACTS				
lame:		Relationship:	Phone:		
lame:					
EHICLE INFORMATION					
IUMBER OF VEHICLES Y	OU WILL PARK HE	RE:			
DRIVER'S LICENSE #:		STATE: _			
MAKE/MODEL:	YEAR:	COLOR:	PLATE #:	STATE:	
MAKE/MODEL:	YEAR:	COLOR:	PLATE #:	STATE:	
EDUCATIONAL HISTORY	High Scho	ol:			
Advanced Degree or Cert					
G 11 1 1 11					
PETS Species: Dog / (Cat /	How many?	Names:		
	Jul /	11011 11101119:			

1. Have you ever filed a petition for bankruptcy? Yes No
2. Have you ever been evicted from tenancy? Yes No
3. Have you ever willfully and intentionally refused to pay rent? Yes No
4. Have you ever violated a lease? Yes No
CRIMINAL HISTORY (Circle one. If yes, explain)
5. Have you ever been arrested (whether or not resulted in indictment)? Yes No
6. Have you ever been convicted of or plead guilty or "no contest" to any crime? Yes No
I hereby state and represent that the information provided in this application is complete and accurate. I understand that in the event a lease is entered into, it may be canceled by the landlord in the event any of the information provided in the application is materially inaccurate or incomplete. In the event this application is not approved, or for any other reason that the lease agreement is not consummated because of the owner, this deposit will be returned to the applicant. This application is made with the understanding that it is subject to acceptance by a legal representative of NesqApts. Therefore, applicant authorizes any credit and security checks necessary for approval of this application. Applicant has deposited herewith the sum of \$
APPLICANT'S SIGNATURE DATE
DATE APPLICATION RECEIVED: RECEIVED BY:
THIS APPLICATION IS RECEIVED WITHOUT RESPECT TO RACE, CREED, COLOR OR NATION ORIGIN
FOR OFFICE USE ONLY
QUALIFIED? EMPLOYMENT [] GUARANTOR [] REFERENCE [] VERIFICATION []
REMARKS
Present Landlord:
Previous Landlord:
Employer:
Bank:
Credit:
Cosigner:
Other:
* APPROVED BY NOT APPROVED

FINANCIAL HISTORY (Circle one. If yes, explain)