

MAXON TOWERS 412-521-7900

Prudential Realty Company

Date: _____

3700 SOUTH WATER STREET-SUITE 100

Pittsburgh, PA: 15203 (412) 261-6500

Fax Number (412) 261-0740

RENTAL APPLICATION

Name of Applicant: _____ DOB: ____/____/____

Social Security Number: _____

Name of Co-Applicant: _____ DOB: ____/____/____

Social Security Number: _____

Name and Age of dependent(s): _____

APPLICANT

Current Address: _____ City: _____ State: ____ Zip Code: _____ Phone: _____

Present Landlord: _____ Phone : _____

Current Rent Amount: _____ How long at above: _____

Previous Landlord: _____ Zip Code: _____ Phone: _____

Employer/Income Source: _____ Phone: _____

Address: _____

Hourly Wage: \$ _____ Annual Income: \$ _____

In Case of Emergency Nearest Relative: _____ Address: _____ Phone: _____

CO-APPLICANT

Current Address: _____ City: _____ State: ____ Zip Code: _____ Phone: _____

Present Landlord: _____ Phone : _____

Current Rent Amount: _____ How long at above: _____

Previous Landlord: _____ Zip Code: _____ Phone: _____

Employer/Income Source: _____ Phone: _____

Address: _____

Hourly Wage: \$ _____ Annual Income: \$ _____

In Case of Emergency Nearest Relative: _____ Address: _____ Phone: _____

AUTOMOBILE INFORMATION

Applicant's Drivers License: _____ Co-Applicant's Drivers License: _____

Car License Plate: _____ Car License Plate: _____

Make / Year: _____ Make / Year: _____

It is understood and agreed that not more than the number of persons shown above will occupy said dwelling. In the event the party or parties herein do not consummate a written lease covering dwelling, this application shall constitute the agreement of the applicant(s) as though it were a fully executed lease, subject, however to the Landlord's investigation and approval of the applicant.

I understand that I acquire no rights in a dwelling until I sign a lease in the form submitted to me and make a deposit of \$ _____ on the apartment I have selected, which deposit is to be held as long as I occupy the apartment. In case of cancellation, the Security Deposit is forfeited. In consideration of the Landlord's holding this dwelling for me, I hereby waive all rights to the return of this deposit and forfeit as liquidated damages in the event that I do not choose to enter into the lease applied herein.

I recognize that as a part of your procedure and processing my application an investigative consumer report may be prepared, whereby information is obtained through personal interviews with the credit bureau, landlords, employers and others whom I may be acquainted, this inquiry includes information as to my character general reputation, personal characteristics and mode of living,

No pets will be allowed on the premises.

The above information, to the best of my knowledge is true and correct.

Address taking: _____ Start up Date: _____ Unit Type: _____

Signature of Applicant: _____ Signature of Co-Applicant: _____

**ENCLOSED ARE 2 CHECKS \$ _____ SECURITY DEPOSIT PLUS \$ _____ FIRST MONTHS RENT
ALSO A SIGNED CONSUMER NOTICE**