



1117 Spruce Street
 Philadelphia, Pa 19107
 (215)-925-8683
 Fax (215)-925-8597
 e-mail rent@msreco.com
 www.michaelsingerre.com

Rental Application

Term of Lease _____ Premises _____
 Commence _____ Exp. _____ Rental Rate _____
 Date of Occupancy _____ Deposit \$ _____
 Agent _____ Comments _____

A fee of \$200.00 (\$150.00 deposit towards one time administration fee, \$50 non-refundable application fee) and a photocopy of your driver's license must accompany this application.

CONSUMER NOTICE

(Not to be used when licensee is subagent for landlord, agent for tenant or transaction licensee.)

(Licensee) Michael Singer hereby states that with respect to this property (describe property), _____, I am acting in the following capacity:

- (I.) Owner/Landlord of the property
- (II.) A direct employee of the owner/landlord
- (III.) An agent of the owner/landlord pursuant to a Property management or exclusive leasing agreement

I acknowledge I have received this Notice.

 PRINT (CONSUMER)

 SIGNED (CONSUMER)

I certify that I have provided this notice: _____
 (LICENSEE) DATE

1. Applicant Data:

 First Name Last Name Social Security Number Date of Birth

 Home Phone Number Cellular Number Work Number Email Address Driver's License Number and State Issued

2. Residence History:

 Current Address Street Apt.# City State Zip Code Monthly Rent/Mortgage

 Community Name/Landlord or Mortgage Holder Phone Number Occupancy Dates

 Previous Address Street Apt.# City State Zip Code Monthly Rent/Mortgage

 Community Name/Landlord or Mortgage Holder Phone Number Occupancy Dates

3. Employment Information:

 Applicant's Employer Address City State Zip Phone Number Position

 Supervisor's Name Length of Employment Gross Monthly Income Other Monthly Income Source

 Applicant's Previous Employer Address City State Zip Phone Number Position

 Supervisor's Name Length of Employment Gross Monthly Income Other Monthly Income Source

4. Student Information:

Which School do you attend?

Other Income (including Financial Aid, parent, etc.)

5. How did you find out about our community?

6. Bank Information:

Financial Institution Name

City/Branch

Checking Account Number

Financial Institution Name

City/Branch

Savings Account Number

7. List All Other Persons Who will Be Occupying Apartment:

Name

Relationship

Name

Relationship

8. Co-signer:

First Name

Last Name

Social Security Number

Relationship

Current Address

Street

Apt.#

City

State

Zip Code

Phone Number

Co-signer Currently Employed by

Address

City

State

Zip

Phone Number

Position

9. Emergency Contact: (not living with applicant)

Last Name

First Name

Phone Number

Relationship

I HEREBY MAKE THIS APPLICATION TO ENTER INTO A STANDARD LEASE FOR THE ABOVE PREMISES. I UNDERSTAND THAT THIS APPLICATION IS SUBJECT TO THE APPROVAL OF THE OWNER. DEPOSIT OF \$_____ IS HEREBY TENDERED WITH THIS APPLICATION. SHOULD THIS APPLICATION NOT BE APPROVED, THE LANDLORD OR HIS AGENT SHALL NOT BE RESPONSIBLE FOR ANY CLAIM OR DAMAGE OTHER THAN THE RETURN OF THE DEPOSIT.

IT IS UNDERSTOOD THAT IF THE APPLICATION IS ACCEPTED, FIRST AND LAST MONTH'S RENT PLUS A SECURITY DEPOSIT AMOUNTING TO ONE MONTH'S RENT WILL BE PAID IN FULL UPON SIGNING OF THE LEASE AGREEMENT.

IF THE APPLICANT IS APPROVED AND APPLICANT REFUSES TO SIGN LEASE, IT IS UNDERSTOOD THAT THE DEPOSIT ACCOMPANYING THIS APPLICATION WILL BE FORFEITED AND RETAINED BY THE AGENT.

ALL MONIES DUE PRIOR TO MOVE-IN MUST BE PAID IN ADVANCE BY CERTIFIED CHECK AND/OR MONEY ORDER. PERSONAL CHECKS WILL NOT BE ACCEPTED.

ALL RENTS MUST BE PAID BY THE FIRST (1ST) DAY OF EACH MONTH.

(IF APPLICABLE) SERVICE FOR UTILITIES MUST BE PLACED IN TENANT'S NAME AS OF THE FIRST DAY OF THE LEASE AGREEMENT.

TO RECEIVE KEYS TO PREMISES, TENANT MUST HAVE A SIGNED LEASE AGREEMENT, BE PAID IN FULL AND (IF APPLICABLE) HAVE PLACED ALL UTILITIES IN TENANT'S NAME.

I CERTIFY THAT I AM OF LEGAL AGE AND THAT ALL OF THE ABOVE ITEMS ARE TRUE AND CORRECT. I GIVE PERMISSION TO ORDER A CREDIT REPORT AND CHECK REFERENCES FOR VERIFICATION AND TO CONTINUE TO DO SO IN THE FUTURE IF REQUIRED. I ALSO CERTIFY THAT I HAVE READ AND FULLY UNDERSTAND ALL THE TERMS AND CONDITIONS OF THIS APPLICATION.

SIGNATURE

DATE