

**IN ORDER FOR US TO PROCESS YOUR APPLICATION, WE NEED:**

- 1. Proof of Income**
- 2. Copy of Social Security Card and Driver's License**
- 3. Application fee of \$35.00 per Applicant age 18 and Older-Check or Money Order Only Payable to Harmony Estates.**
- 4. Fully Completed Application**

Your application will not be processed without the above.

Please mail your completed application to Property Management, Inc., Manufactured Housing Division, P.O. Box 622, Lemoyne, PA 17043

Telephone: 730-4141      Fax: 730-4140

## RENTAL APPLICATION PROPERTY MANAGEMENT, INC.

**CONSUMER NOTICE TO APPLICANTS - THIS IS NOT A CONTRACT.**

[Licensee] hereby states that with respect to this property  
[Property Name], I am acting in the following capacity

<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>

Owner/Landlord of the Property;  
A direct employee of the Owner/Landlord; OR  
An agent of the Owner/Landlord pursuant to a property management or exclusive  
leasing agent.

I acknowledge I have received this Notice:

\_\_\_\_\_  
Applicant Date

\_\_\_\_\_  
Applicant Date

I certify that I have provided this Notice:

\_\_\_\_\_  
Licensee Date

Property	Harmony Estates
Lot Number	
Base Rent	
Security Deposit	
Pet Fee	\$25.00
Pet Security	\$200.00
Additional Fees	*****
Expected Move In Date	
Approval Date	

**APPLICANT INFORMATION**

FULL NAME - LAST, FIRST, MIDDLE

BIRTHDATE NUMBER OF OTHER OCCUPANTS

SOCIAL SECURITY NUMBER DRIVERS LICENSE NUMBER

PRESENT STREET ADDRESS

CITY, STATE ZIP CODE

HOME PHONE NUMBER HOW LONG AT ADDRESS  
YEARS: MONTHS:

RESIDENTIAL STATUS: HOMEOWNER, RENTER, OTHER

LANDLORD or MORTGAGE HOLDER

PHONE NUMBER CURRENT RENT/MORTGAGE

PREVIOUS ADDRESS

HOW LONG AT PREVIOUS ADDRESS YEARS: MONTHS:

PRIOR LANDLORD NAME & PHONE #

**CO-APPLICANT INFORMATION**

FULL NAME - LAST, FIRST, MIDDLE

BIRTHDATE NUMBER OF OTHER OCCUPANTS

SOCIAL SECURITY NUMBER DRIVERS LICENSE NUMBER

PRESENT STREET ADDRESS

CITY, STATE ZIP CODE MONTHS:

HOME PHONE NUMBER HOW LONG AT ADDRESS  
YEARS: MONTHS:

RESIDENTIAL STATUS: HOMEOWNER, RENTER, OTHER

LANDLORD or MORTGAGE HOLDER

PHONE NUMBER CURRENT RE MONTHS:

PREVIOUS ADDRESS

HOW LONG AT PREVIOUS ADDRESS YEARS: MONTHS:

PRIOR LANDLORD NAME & PHONE #

LIST ALL OTHER PERSONS WHO WILL BE LIVING IN THE UNIT. GIVE RELATIONSHIP TO APPLICANT.

	FULL NAME - LAST, FIRST, MIDDLE	RELATIONSHIP	BIRTHDATE	SEX	SOCIAL SECURITY NUMBER
1					
2					
3					
4					
5					
6					

DO YOU EXPECT ANY ADDITIONS TO THE HOUSEHOLD WITHIN THE NEXT TWELVE MONTHS? IF SO, NAME/RELATIONSHIP

**BANK/CREDIT REFERENCES**

CHECKING ACCOUNT #  
SAVINGS ACCOUNT #  
OTHER

**BANK/CREDIT REFERENCES**

CHECKING ACCOUNT #  
SAVINGS ACCOUNT #  
OTHER

**APPLICANT INFORMATION****EMPLOYMENT**

EMPLOYER

CITY, STATE

PHONE NUMBER

FAX NUMBER

JOB TITLE OR OCCUPATION

HIRE DATE

HOURLY RATE

SUPERVISOR

HOURS PER WEEK

PREVIOUS EMPLOYER

EMPLOYED FROM - TO

PHONE NUMBER

OTHER INCOME - OTHER JOB, ALIMONY, CHILD SUPPORT, ETC.

MONTHLY AMOUNT

MAKE AND MODEL OF VEHICLE

COLOR

VIN#

LICENSE PLATE #

RELATIVE LIVING CLOSEST/RELATIONSHIP

RELATIVE ADDRESS

PHONE NUMBER

**CO-APPLICANT INFORMATION****EMPLOYMENT**

EMPLOYER

CITY, STATE

PHONE NUMBER

FAX NUMBER

JOB TITLE OR OCCUPATION

HIRE DATE

HOURLY RATE

SUPERVISOR

HOURS PER WEEK

PREVIOUS EMPLOYER

EMPLOYED FROM - TO

PHONE NUMBER

OTHER INCOME - OTHER JOB, ALIMONY, CHILD SUPPORT, ETC.

MONTHLY AMOUNT

MAKE AND MODEL OF VEHICLE

COLOR

VIN#

LICENSE PLATE #

RELATIVE LIVING CLOSEST/RELATIONSHIP

RELATIVE ADDRESS

PHONE NUMBER

IF THE ANSWER IS 'YES' TO ANY OF THE FOLLOWING QUESTIONS, PLEASE EXPLAIN ON AN ATTACHED SHEET. ENTER 'YES' OR 'NO' IN EACH COLUMN IF APPLICABLE.

	APPLICANT	CO-APPLICANT
[1] HAVE YOU DECLARED BANKRUPTCY WITHIN THE LAST TEN YEARS?		
[2] HAVE YOU EVER BEEN EVICTED FROM A PROPERTY?		
[3] HAVE YOU HAD ANY JUDGMENTS, REPOSSESSIONS, GARNISHMENTS OR OTHER LEGAL PROCEEDINGS FILED AGAINST YOU WITHIN THE LAST SEVEN YEARS?		
[4] HAVE YOU EVER BEEN CONVICTED OF A CRIME? IF YES, PLEASE PROVIDE SPECIFICS FOR ALL CRIMES FOR WHICH YOU HAVE BEEN CONVICTED.		
[5] HAVE YOU EVER REFUSED TO PAY RENT AT ANY RESIDENCE?		
[6] DO YOU HAVE ANY PAST OBLIGATIONS TO OR INSURED BY ANY AGENCY OF THE FEDERAL GOVERNMENT?		
[7] ARE YOU A CO-MAKER OR GUARANTOR ON A NOTE? FOR WHOM? HOW MUCH?		
[8] DO YOU HAVE ANY PETS? IF YES, CAT OR DOG? BREED:		
[9] HAVE YOU REVIEWED THE PARK RULES AND REGULATIONS?		

I / WE HAVE PAID THE \$35.00 PER PERSON (NON REFUNDABLE) APPLICATION FEE PAYABLE TO PROPERTY MANAGEMENT INC.

**PLEASE READ CAREFULLY - APPLICANT'S CERTIFICATION AND AGREEMENT**

I HEREBY CERTIFY THAT THE FACTS SET FORTH IN THE ABOVE APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT IF INCOMPLETE OR FALSE INFORMATION IS PROVIDED ON THE APPLICATION, IT MAY BE REJECTED ON THIS BASIS. IF ACCEPTED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE CONSIDERED SUFFICIENT CAUSE FOR EVICTION. YOU ARE HEREBY AUTHORIZED TO MAKE INVESTIGATION OF MY RENTAL HISTORY, CRIMINAL HISTORY, COURT RECORDS, CREDIT AND FINANCIAL HISTORIES, AND EMPLOYMENT THROUGH ANY INVESTIGATION OR CREDIT AGENCIES OF YOUR CHOICE.

APPLICANT

DATE

CO-APPLICANT

DATE

AUTHORIZATION TO RELEASE INFORMATION

I (We), the undersigned, do give permission for you to release information to Property Management, Inc. for the purpose of verifying information on my (our) application for rental. This includes income information, rental history, credit and criminal history.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date