



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

- Proof of Income for EACH applicant 18 years or older.
- Copy of Social Security Card for EACH applicant 18 years or older.
- Copy of Valid Driver's License for EACH applicant 18 years or older.
- Fully completed Application for EACH applicant 18 years or older.
- Application fee: \$35.00 PER person 18 years or older
Check or Money Order Payable to LITTLE MOUNTAIN ESTATES
Or you may pay with your Visa, MC or Discover by calling 717 730-4141

- MAIL YOUR APPLICATION TO:
Property Management, Inc.
Manufactured Housing Division
P.O. Box 622
Lemoyne, PA 17043
Or Fax: 717 730-4140

- ❖ YOUR APPLICATION WILL NOT BE PROCESSED WITHOUT ALL OF THE ITEMS ON THE CHECKLIST ABOVE!
- ❖ After approval, tenant will be required to sign a lease at our Lemoyne office.
- ❖ Before move-in, tenant will be required to attend “walk through inspection” with the On Site Coordinator.

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

X

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	Little Mountain Estates
Lot Number	
Base Rent	
Security Deposit	
Pet Fee	\$25.00
Pet Security	\$200.00
Additional Fees	Water and Sewer
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 _____ MONTHS: _____

CITY, STATE ZIP CODE _____

HOME PHONE NUMBER _____ HOW LONG AT ADDRESS
 YEARS: _____

RESIDENTIAL STATUS: HOMEOWNER, RENTER, OTHER _____

LANDLORD or MORTGAGE HOLDER _____

PHONE NUMBER _____ CURRENT RE MONTHS: _____

PREVIOUS ADDRESS _____

HOW LONG AT PREVIOUS ADDRESS YEARS: _____

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	

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