



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 LOG CABIN 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 | Log Cabin Court |
| 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 _____ MONTHS: _____

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 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