



Homestead Property Management
1020 E Baltimore Pike, 2nd Floor
Media, PA 19063
Office 610-565-0550
Fax 610-565-0440

Rental Application Checklist

Apply online at www.homesteadrents.com/vacancies

- Complete Rental Application
 - Be sure to initial the bottom of each page, and the authorizations on Page 4, Section 16.
 - Sign your name at the end of the application
 - Fill our your Social Security # and Date of Birth on the Authorization Form
- Provide copy of government issued photo ID
- Provide proof of income (paystubs, W-2, SSI, etc.)
- \$65 application fee per adult
- **Minimum Requirements:**
 - 550 Credit Score, with no more than \$1,000 in collections
 - Verifiable Net Monthly Income at least 2.5x the Monthly Rent
 - Acceptable Rental History and Criminal Record History. See more details at www.homesteadrents.com/application-requirements

Return application and make application fee payable to:

**Homestead Property Management
1020 E Baltimore Pike, 2nd Floor
Media, PA 19063**

Fax: 610-565-0550

Email: admin@homesteadrents.com

Apply online at www.homesteadrents.com/vacancies

RENTAL APPLICATION FOR LANDLORD AGENTS

This form recommended and approved for, but not restricted to use by, the members of the Pennsylvania Association of Realtors® (PAR).

RALA

APPLICANT HAS NO RELATIONSHIP WITH PA LICENSED BROKER. Broker listed below is an agent of the Landlord, who works exclusively for the Landlord and must act in the Landlord's best interest.

CONSUMER NOTICE FOR TENANTS THIS IS NOT A CONTRACT

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

- (i) Owner/Landlord of the Property;
- (ii) A direct employee of the Owner/Landlord; OR
- (iii) An agent of the Owner/Landlord pursuant to a property management or exclusive leasing agreement.

I acknowledge that I have received this Notice:

Date: _____ Print (Consumer) _____ Signed (Consumer) _____

I certify that I have provided this Notice: _____
(Licensee) _____ (Date) _____

LANDLORD'S RELATIONSHIP WITH PA LICENSED BROKER

No Business Relationship (Landlord is not represented by a broker)

Broker (Company) Homestead Property Management Services

Company License # RB067562

Company Address 1020 E Baltimore Pike, 2nd Floor Media, PA 19063

Company Phone (610) 565-0550

Company Fax (484) 605-2436

Broker is Landlord Agent (Broker represents Landlord only)

This form should be used only when the real estate licensee represents the Landlord, is a direct employee of the Landlord, or owns the Property.

Licensee(s) (Name) _____

State License # _____

Direct Phone(s) _____

Cell Phone(s) _____

Email _____

Licensee(s) is (check only one):

Landlord Agent (all company licensees represent Landlord)

Landlord Agent with Designated Agency (only Licensee(s) named above represent Landlord)

PROPERTY INFORMATION (To be supplied by Broker for Landlord)

Address _____

Move-in Date _____ Term _____

Application Fee (non-refundable) \$ _____ Application Deposit \$ _____

Monthly Rent \$ _____ Security Deposit \$ _____

First Month's Rent \$ _____ Last Month's Rent \$ _____

Rent and Security Deposit checks will be written separately.

Are pets permitted? (Yes) (No) May be subject to review. **Note:** The term "pets" does not include guide or support animals.

Non-refundable Pet Fee \$ _____ Pet Rent \$ _____

Other \$ _____ Other \$ _____

Is rental insurance required for tenants? (Yes) (No)

Applicant's Initials _____

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Pennsylvania Association of REALTORS®

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1/17; rel. 7/17

1 **1. APPLICANT INFORMATION**

- 2 (A) The individual listed below is a(n): (Applicant) (Co-signer)

3 Each Co-signer must complete an application for the Property and will be considered an "Applicant" as defined in this form. If the
4 application is approved and the parties enter into a lease, each Co-signer will be individually responsible for all of the obligations
5 of the lease, including rent, fees, damages and other costs. Co-signers will not have the right to occupy the Property as a tenant
6 without Landlord's prior written permission.

7 Full Name _____

8 Home Phone _____ Work Phone _____

9 Cell Phone _____ Email _____

10 How did you hear about the Property? _____

- 11 (B) Provide at least **two years** of history. Attach additional sheets if more space is needed.

12 Present Address & ZIP _____

13 From _____ To _____ Rent/Mortgage \$ _____ /mo. (Own) (Rent) (Other)

14 Landlord/Mortgage Co. Name & Phone _____

15 Previous Address & ZIP _____

16 From _____ To _____ Rent/Mortgage \$ _____ /mo. (Own) (Rent) (Other)

17 Landlord/Mortgage Co. Name & Phone _____

- 18 (C) **Is Applicant at least 18 years old?** (Yes) (No)

19 Are you applying with anyone else? (Yes) (No) **A separate application must be completed for each applicant/co-signer.**

20 Name _____ (Applicant) (Co-signer)

21 Name _____ (Applicant) (Co-signer)

22 Name _____ (Applicant) (Co-signer)

23 Name _____ (Applicant) (Co-signer)

24 Will anyone else be occupying the property? (Yes) (No)

25 If yes, include the full name of any other person not listed above who will be occupying the property.

26 Name _____ 18 or older

27 Name _____ 18 or older

28 Name _____ 18 or older

29 Name _____ 18 or older

30 Check here if additional information is attached

31 **2. EMPLOYMENT INFORMATION**

- 32 Provide at least **two years** of history. Attach additional sheets if more space is needed.

33 Employer _____

34 Employed From _____ To _____ Position _____

35 City/State _____ Phone _____

36 Supervisor _____

37 Gross Income: \$ _____ /mo. OR \$ _____ /hr., for _____ hrs. per week (on average)

38 Previous Employer _____

39 Employed From _____ To _____ Position _____

40 City/State _____ Phone _____

41 Supervisor _____

42 Gross Income: \$ _____ /mo. OR \$ _____ /hr., for _____ hrs. per week (on average)

43 Proof of income attached

44 Check here if additional information is attached

45 **3. OTHER INCOME USED FOR MONTHLY EXPENSES**

46 Alimony, child support, or separate maintenance income need not be revealed if Applicant does not wish to have it considered as a
47 basis for paying this obligation.

48 Source _____ Amount _____ Source _____ Amount _____

49 _____ _____ _____ _____

50 _____ _____ _____ _____

51 _____ _____ _____ _____

52 _____ _____ _____ _____

53 Check here if additional information is attached

54 **4. BANK ACCOUNT INFORMATION**

55 Bank Name _____ Account Type _____ Balance _____ \$ _____

56 _____ _____ _____ _____ \$ _____

57 _____ _____ _____ _____ \$ _____

58 _____ _____ _____ _____ \$ _____

59 Check here if additional information is attached

60 Applicant's Initials _____

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60 **Applicant Name** _____

61 **5. MONTHLY PAYMENTS**

Lender Name	Loan Type	Balance Due	Monthly Payment
_____	_____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____
_____	_____	\$ _____	\$ _____

67 **Check here if additional information is attached**

68 **6. VEHICLE**

69 Include any cars, trucks, vans, motorcycles, trailers, boats and recreational vehicles.

Make/Model	Year	Color	License Plate/State
_____	_____	_____	_____
_____	_____	_____	_____

74 **Check here if additional information is attached**

75 **7. PETS**

76 Does any Applicant or Occupant own any pets (guide and support animals not included)? (Yes) (No)

77 If yes, provide detail below.

Type (Cat, Dog, etc.)	Pet 1	Pet 2	Pet 3
Breed	_____	_____	_____
Age	_____	_____	_____
Weight	_____	_____	_____
Gender	_____	_____	_____

84 **8. OTHER INFORMATION**

85 (Yes) (No) Have you ever declared bankruptcy or suffered foreclosure?

86 If yes, list any payments: \$ _____

87 (Yes) (No) Have you ever defaulted on your mortgage?

88 (Yes) (No) Have you been evicted or sued for unpaid rent or damages to leased property?

89 (Yes) (No) Have you ever refused to pay rent for any reason?

90 (Yes) (No) Have you ever been convicted of or entered a plea of guilty or nolo contendere for a felony or misdemeanor?

91 (Yes) (No) Since January 1, 1998, Have you been obligated to pay support under any order(s) of record? If yes:

92 County _____ Domestic Relations File or Docket Number: _____

93 Amount _____ Are you delinquent? _____

94 If you answered "yes" to any of the above questions, you may not be automatically disqualified from residency. Please explain any
95 "yes" answers provided above: _____

98 **Check here if additional information is attached**

99 **9. CONDITION OF PROPERTY**

100 The Property will be leased in the same condition as it is shown unless otherwise provided in the lease.

101 **10. APPLICATION FEE**

102 The Application Fee is NON-REFUNDABLE and will not be applied towards rent or other financial obligations should Applicant be
103 approved, nor refunded if not approved. Applicant agrees that this sum is paid in consideration of Landlord/Broker for Landlord's
104 review and/or verification of the information stated in the application.

105 **11. OBLIGATION TO ENTER INTO LEASE AGREEMENT/ DAMAGES**

106 Upon submission of this Application, Landlord/Broker for Landlord reserves the right to remove property from the available rent list.
107 If this Application is denied by Landlord, the Application Deposit shall be refunded to Applicant. If this Application is approved and
108 Applicant fails to rent the Property, Landlord shall be entitled to retain the Application Deposit.

109 **12. CONVICTED SEX OFFENDERS (MEGAN'S LAW)**

110 The Pennsylvania General Assembly has passed legislation (often referred to as "Megan's Law," 42 Pa.C.S. § 9791 et seq.) providing
111 for community notification of the presence of certain convicted sex offenders. **Potential tenants are encouraged to contact the**
112 **municipal police department or the Pennsylvania State Police for information relating to the presence of sex offenders near a**
113 **particular property, or to check the information on the Pennsylvania State Police Web site at www.pameganslaw.state.pa.us.**

114 **13. NOTICE TO PERSONS OFFERING TO SELL OR RENT HOUSING IN PENNSYLVANIA**

115 (A) Federal and state laws make it illegal for Landlord, Broker, or anyone to use RACE, COLOR, RELIGION or RELIGIOUS
116 CREED, SEX, DISABILITY (physical or mental), FAMILIAL STATUS (children under 18 years of age), AGE (40 or older),
117 NATIONAL ORIGIN, USE OR HANDLING/TRAINING OF SUPPORT OR GUIDE ANIMALS, or the FACT OR RELA-
118 TIONSHIP OR ASSOCIATION TO AN INDIVIDUAL KNOWN TO HAVE A DISABILITY as reasons for refusing to sell,
119 show, or rent properties, loan money, or set deposit amounts, or as reasons for any decision relating to the sale of property. The
120 municipality in which the Property is located may have enacted an ordinance or other law that extends the protections for access

121 **Applicant's Initials** _____

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122 **Applicant Name** _____

123 to housing to additional classes of individuals, such as gay, lesbian, bisexual and transgender individuals and couples. Broker
124 and Landlord are advised to check with your local municipality, representative from the Pennsylvania Human Relations
125 Commission, or your own attorney for further guidance.

- 126 (B) The Fair Housing Act prohibits rental practices which have a discriminatory effect on members of protected classes, including
127 outright bans on offering housing to individuals based on arrests or convictions without a case-by-case assessment of relevant
128 mitigating factors. Consideration of an applicant's criminal history must be limited to convictions and should include an evalua-
129 tion of the nature and severity of the offense, the amount of time that has passed since the criminal conduct occurred, and
130 whether denial of the application will serve a substantial, legitimate, nondiscriminatory interest. Selective use of an applicant's
131 criminal history as a pretext for intentional discrimination based on race, national origin, or other protected characteristics may
132 be a violation of the Act, as well.

133 **14. FAIR CREDIT REPORTING ACT**

134 If the Landlord or Broker denies your application based in whole or in part on any information contained in the consumer report authorized by
135 paragraph 16 of this Application, the Landlord or Broker must provide you with oral, written or electronic notice of the denial, and must provide
136 to you: (1) the name, address, and telephone number of the consumer reporting agency (including a toll-free telephone number established by
137 the agency if the agency compiles and maintains files on consumers on a nationwide basis) that furnished the report, (2) a statement that the
138 consumer reporting agency did not make the decision to deny the application and is unable to provide you with the specific reasons why your
139 application was denied, (3) a numerical credit score, the range of possible credit scores under the model used, up to four of the key factors that
140 led to the denial, and the date the credit score was created (4) information about how to obtain a free copy of your consumer report from the
141 consumer reporting agency, and (5) information about how to dispute the accuracy or completeness of any information in a consumer report
142 furnished by the agency. If the Landlord or Broker denies your application because of information from a person other than a credit reporting
143 agency (for example, an employer or prior landlord), the Landlord or Broker must provide you with notice about your right to make a written
144 request to discover the nature of that information.

145 **15. SPECIAL CLAUSES**

146 (A) **The following are part of this Application if checked:**

- 147 Advanced Payment Addendum (PAR Form APA)
148 _____
149 _____

150 (B) **Additional Terms:** _____
151 _____
152 _____

153 **16. AUTHORIZATION**

154 By initialing below, Applicant makes the following authorization(s):

155 _____ Applicant authorizes Landlord or Broker for Landlord to obtain any information deemed necessary to evaluate this
156 Application. This information may include, but is not limited to, credit reports, criminal history, judgments of record, rental
157 history, verification of employment and salary, employment history, vehicle records, and licensing records. Broker for
158 Landlord may report to Landlord any information obtained by Broker for Landlord for evaluation of the Application.
159 Applicant acknowledges that all information in the Application is true and correct. Applicant acknowledges that if applicant
160 presents false or incomplete information Landlord may reject this Application. Applicant understands that giving false or
161 incomplete information may result in forfeiture of any payments made in connection with this Rental Application.

162 _____ Applicant understands and acknowledges that Aplicant's social security number, driver's license number, date of birth, or
163 other personal identifying information may be required in order for Landlord or Broker for Landlord to evaluate this applica-
164 tion. If requested, Applicant agrees to provide the information on a separate form such as the Social Security Number
165 Authorization (PAR Form SSA). Failure to provide this information may result in the denial of your application.

166 _____ Applicant agrees that Broker(s), his/her agent(s) and/or employee(s) may provide Applicant's social security number,
167 individual taxpayer identification number, driver's license information and date of birth to lenders, title agencies, credit
168 reporting companies, or others as necessary for obtaining reports or information from a credit reporting agency, determin-
169 ing the existence of domestic liens, or for obtaining a criminal background report (for prospective tenants only).
170 **Applicant understands that Brokers have no control over the use of any information after it is disclosed to a third
171 party and agrees to release and hold Brokers harmless from any and all liability for any misuse or subsequent dis-
172 closure by any third party of the information or reports disclosed by Broker pursuant to the terms of this auth-
173 orization.**

174 _____ Applicant authorizes the Broker for Landlord to contact the Applicant directly.

175 **I HAVE READ AND AGREE TO THE PROVISIONS AS STATED.**

176 **APPLICANT SIGNATURE** _____

177 **DATE** _____

APPLICANT NAME _____

SOCIAL SECURITY NUMBER AUTHORIZATION

SSA

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1 CONSUMER NAME _____

2 CONSUMER ADDRESS _____

3 CONSUMER SOCIAL SECURITY NUMBER _____

4 CONSUMER DATE OF BIRTH _____

5 BROKER Homestead Property Management Services

6 A separate authorization form must be completed for each consumer involved in a real estate transaction.

7 I agree that Broker(s), his/her agent(s) and/or employee(s) may provide my social security number to lenders, title agencies, credit reporting companies, or others as necessary for obtaining reports or information from a credit reporting agency, determining the existence of domestic liens, obtaining a criminal background report (for prospective tenants only), ordering a mortgage payoff or for purposes of satisfying requirements of the Patriot Act.

11 CONSUMER UNDERSTANDS THAT BROKER HAS NO CONTROL OVER THE USE OF ANY INFORMATION AFTER
12 IT IS DISCLOSED TO A THIRD PARTY. CONSUMER AGREES TO RELEASE AND HOLD BROKER HARMLESS FROM
13 ANY AND ALL LIABILITY FOR ANY MISUSE OR SUBSEQUENT DISCLOSURE BY ANY THIRD PARTY OF THE
14 INFORMATION OR REPORTS DISCLOSED BY BROKER PURSUANT TO THE TERMS OF THIS AUTHORIZATION.

15 Consumer's signature serves as an acknowledgement of receipt of a copy of this authorization.

16 CONSUMER _____ DATE _____



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12/13

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Rental Application

Produced with zipForm® by zipLogix 18070 Fifteen Mile Road, Fraser, Michigan 48026 www.zipLogix.com