



RENTAL APPLICATION
Penthouse Properties LLC
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P.O. Box 10451
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412-943-7660

Today's Date: 8-15-2016

Occupancy Date Desired: 9-1-2016

Rental Price Range: 1100.00

Type/Size Desired: 2 bedroom house

Rental Address Shown: **3441 Brighton Road**

APPLICANT'S PERSONAL INFORMATION

Last Name: _____ First: _____ Middle: _____

Birthdate: _____ Driver's License/ID Number/State: _____

Professional Work Registration number _____

Social Security #: _____ Email address: _____

Phone # _____ Phone # _____

Spouse/ co- applicant

Last Name: _____ First: _____ Middle: _____

Birthdate: _____ Driver's License/ID Number/State: _____

Social Security #: _____ Email address: _____

Phone # _____ Phone # _____

Additional Occupants (List every occupant name and their relationship and age below, including children)

Breed of pet _____ Name _____ Age _____

Preferred Method of "Worry-Free" Standard Rental Payments:

Electronic Banking _____ Payroll Deduction _____ Charge Card _____ Debit Card _____

_____ **Auto Draft from my bank account monthly for a \$20.00 discount each month**

Mail _____ Deposit to Bank Account _____ Check _____ Money Order _____

How long do you plan on living in the next rental home that meets your needs? _____

Would you like to receive a rental gift on your anniversary dates as part of a "3 Star Resident Program"? _____

Would you like to purchase a home within the next 2 to 3 years? _____ If so, what size/type property

would you like to buy? _____ What area? _____

Would you be interested in our Future Home Buyers Program to help you find and buy your first home? _____

Are you able to handle all the minor maintenance/upkeep in the property Yes _____ No _____.

Check the following items that you own -

Vacuum Cleaner _____ Mop _____ Broom _____ Plunger _____ Lawn Mower _____

Appliances: Stove _____ Refrigerator _____ Washer _____ Gas Dryer _____ Electric Dryer _____ Microwave _____

Note: 3441 Brighton has a New Dishwasher, Refrigerator and Stove installed in 2016.

Check all professional level skills possessed: Electrical _____ Painting _____ Plumbing _____

Roofing _____ Appliance repair _____ Air Conditioning _____ Heating _____ Carpentry _____

Do you have renter's insurance? ___ Agency _____ Do you have any water-filled furniture? _____
Have you ever broken a lease? _____ Have you ever refused to pay rent for any reason? _____
Have you ever been evicted or asked to leave a rental unit? _____ Why? _____
Ever filed for bankruptcy? _____ When? _____
Ever been convicted of a crime ___ Will you give us permission to do a criminal background check? ___
Do you currently have utilities in your name? ___ Do you currently have phone service in your name? ___
Is there anything to prevent you from placing utilities or phone in your name? _____
Do you know of anything or any reason which may interrupt your ability to pay rent? ___ What? _____

RESIDENCE HISTORY

Present Street Address _____
City _____ State _____ Zip _____
Dates lived at this address? _____ Own ___ Rent ___ Occupy ___
Current Phone _____ How many pets did you have? ___ Type _____
Name of present landlord/owner/mortgage company: _____
Address of present landlord/mortgage company: _____
Landlord's phone: _____ Monthly payment: _____
Reason for moving: _____ Is your rent/mtg current? _____
Number of late payments? _____ Security Deposit **Amount** currently held by landlord? _____

Previous Residence Address: _____
Previous landlord: _____ Previous landlord's phone: _____
Dates at this address: _____ Reason for moving? _____
Was your Full Security Dep. Returned? ___ # of late payments? ___ Monthly payment? _____

Previous Residence Address: _____
Previous landlord: _____ Previous landlord's phone: _____
Dates at this address: _____ Reason for moving? _____
Was your Full Security Dep. Returned? ___ # of late payments? ___ Monthly payment? _____

INCOME HISTORY

Applicant's current employment status:
Full-time ___ Part-time (less than 32hrs) ___ Student ___ Retired ___ Self-employed ___
Unemployed ___ Other Income _____

Primary source of employment:

Applicant employed by: _____ Supervisor's name: _____
Professional License # _____
Average Weekly hours: _____ How long at the place of employment? _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Position: _____ Salary: _____
Please circle... Weekly, Bi-Weekly, Monthly, or Annual Average Take home:\$ _____

Additional Employment or Spouse Employment

Employed by: _____ Supervisor's name: _____
Professional License # _____
Average Weekly hours: _____ How long at the place of employment? _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Position: _____ Salary: _____
Please circle... Weekly, Bi-Weekly, Monthly, or Annual. Average Take home pay:\$ _____

ADDITIONAL INCOME / PAYMENT INFORMATION

In the event of some emergency that would prevent you from paying rent when due, is there a relative, person, or agency that could assist you with rent payments?

1st Emergency Contact: _____
Relationship _____
Address _____
Phone# _____ 2nd Phone # _____

2nd Emergency Contact: _____
Relationship _____
Address _____
Phone _____ 2nd phone # _____

Do you currently have a **savings account**, line of credit, or charge card sufficient to cover one month's rent?

Name of bank or credit card _____
ADDRESS _____

ADDITIONAL INCOME: (optional)

If there are additional, verifiable sources of income you would like considered, Please list income source (i.e., **Self-Employment, Social Security, Food Stamps, Disability Payments, Military benefit** payments, etc.), and requested information below regarding each source. Applicant may be required to produce additional documentation or provide and sign release statements. Child support, alimony, or separate maintenance need NOT be disclosed unless you desire this additional income to be considered for qualification.

Additional Source: _____ Amount:\$ _____ Per _____
Contact person: _____ Phone: _____
How long have you been receiving income from this source? _____ How long do you expect this income continue?
_____ Is there any reason it would stop? _____

Additional Source: _____ Amount:\$ _____ Per _____
Contact person: _____ Phone: _____
How long have you been receiving income from this source? _____ How long do you expect this income continue?
_____ Is there any reason it would stop? _____

List your TOTAL COMBINED INCOME from ALL Sources here \$ _____

ASSETS / CREDITS / LOANS

Number of vehicles on property? _____ Valid registration & inspection? _____
Do you have any commercial vehicles, _____ RV, campers, boats or motorcycles? _____

Vehicle 1-make/model/color/year _____
Please note, only cars on application are authorized to be on premises.
Plate number _____ State _____
Financed/leased through _____
Contact and phone number _____
Acct. # _____ Monthly payment _____

Vehicle 2-make/model/color/year _____
Please note, only cars on application are authorized to be on premises.
Plate number _____ State _____
Financed/leased through _____
Contact and phone number _____
Acct. # _____ Monthly payment _____

CREDIT CARDS, LOANS (including banks, department store, gas cards, student loans)

Creditor: _____
Address _____
Phone: _____ Acct. #: _____
Total Amount owed: _____ Monthly payment: _____ Are your payments current? _____

Other Creditor: _____
Address _____
Phone: _____ Acct. #: _____
Total Amount owed: _____ Monthly payment: _____ Are your payments current? _____

List any other current monthly expenses? Enter dollar values here.

Hospital payment _____ Health Insurance _____ Auto Insurance _____
Renter's Insurance _____ Internet _____ Tuition _____
Cable TV _____ Cell Phones _____ Child Care _____

BANK REFERENCE

Name of bank and branch: _____ Phone: _____
Branch address: _____
Checking Acct. #: _____
Savings Acct#: _____
How long account active, (Checking) _____ (Savings) _____ Average monthly balance, (C) _____ (S) _____

PERSONAL/PROFESSIONAL REFERENCES

Character/Personal reference:
Name _____
Address _____
City _____ State _____ Zip _____
Relationship? _____ How long? _____ Phone _____

Professional reference (i.e. attorney, accountant):
Name _____
Address _____
City _____ State _____ Zip _____
Relationship? _____ How long? _____ Phone _____

Name of Nearest Living Relative:
Name _____
Address _____
City _____ State _____ Zip _____
Relationship? _____ How long? _____ Phone _____

Name of Doctor or Health Care Provider:
Name _____
Address _____
City _____ State _____ Zip _____
Relationship? _____ How long? _____ Phone _____

Do you give owner or manager permission to contact references listed above both now and in the future for rental consideration or for collection purposes should they be deemed necessary? _____

If Management has a question regarding this application, please furnish the best contact phone number:
Day phone/contact person: _____
Night phone/contact person: _____

THANK YOU!

Thank you for completing an application to rent from us. Please sign below. Please note that a completed application requires submission of the following which will be copied and attached to this application:

- Driver's License or Sheriff's picture ID. Note: rentals will not be shown without picture ID
- Personal check (to verify bank) 2 months of most current pay stubs of each income source listed
- Social Security Card copy
- If self-employed, most current Schedule C tax return and proof of current income

By signing below, applicant hereby represents all information on this application is true, complete, and hereby authorizes annual verification of information, references, and credit history for continual rental consideration or for collection purposes should that become necessary

Applicant acknowledges this application will become part of the lease agreement when approved. If any information is found to be incorrect, the application will be rejected and any subsequent rental agreement becomes void. False and misleading statements will be sufficient reason for immediate eviction and loss of security deposit.

FREE UPGRADE BONUS

Final note: Our company offers a free upgrade for residents who recommend friends, relatives or co-workers to us and they meet our minimum criteria and decide to rent from us or be placed on our priority waiting list. If your application is accepted, you may be able to qualify for a free upgrade in your new residence. Please give the name of a friend, relative or co-worker along with a phone number and we will contact them to see if they too would like to apply and rent one of our homes. The following person(s) may be interested in renting a home:

Friend looking for a home _____ Phone _____

Applicant's signature: _____ **Date:** _____ **Phone** _____

Co Applicant's Signature _____ **Date** _____ **Phone** _____