

# WESTMINSTER ARCH APARTMENTS

## TENANT APPLICATION

**Instructions: This form must be completed in full including signatures at both lines indicated by "X".**

**Print and fax to: (215) 567-9650**

Applicant's Complete Name:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Check One: Married: \_\_\_\_\_ Single: \_\_\_\_\_ Widowed: \_\_\_\_\_ Divorced: \_\_\_\_\_ Separated: \_\_\_\_\_

How Long? \_\_\_\_\_

Spouse/Partner's Complete Name: \_\_\_\_\_

Social Security Number: Applicant's: \_\_\_\_\_

Social Security Number: Spouse/Partner: \_\_\_\_\_

Number of people who will reside in the apartment:

Adults: \_\_\_\_\_

Children (include age): \_\_\_\_\_

Pets: \_\_\_\_\_

Present Home Address:

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Length of Stay at Present Residence: \_\_\_\_\_ Please Circle: OWN/RENT

Name of Landlord/Mortgage Holder: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Landlord/Mortgage Holder Complete Address:

Your Monthly Rental or Mortgage Payment: \_\_\_\_\_

Mortgage Account Number/Apartment Number: \_\_\_\_\_

Previous Home Address:

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Length of Stay at Previous Residence: \_\_\_\_\_ Please Circle: OWN/RENT

Name of Landlord/Mortgage Holder: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Landlord/Mortgage Holder Complete Address:

Your Monthly Rental or Mortgage Payment: \_\_\_\_\_

Mortgage Account Number/Apartment Number: \_\_\_\_\_

**EMPLOYER INFORMATION**

Currently Employed by: \_\_\_\_\_

Address:

I.D. or Badge Number: \_\_\_\_\_

Position: \_\_\_\_\_

Division or Department: \_\_\_\_\_

Office Phone: \_\_\_\_\_

Income (Please state if weekly, monthly, yearly, gross or net): \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_

Length of Employment: \_\_\_\_\_

Former Employer: \_\_\_\_\_

Address:

Spouse/Partner Employed by: \_\_\_\_\_

Office Address:

I.D. or Badge Number: \_\_\_\_\_

Position: \_\_\_\_\_

Division or Department: \_\_\_\_\_

Office Phone: \_\_\_\_\_

Income (Please state if weekly, monthly, yearly, gross or net): \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_

Length of Employment: \_\_\_\_\_

Former Employee (if employed less than 3 years):

Address:

**OTHER INCOME:**

**Notice:** Alimony, child support or separate maintenance need not be revealed if the Applicant does not choose to have it considered as income.

Applicant: \_\_\_\_\_

Spouse/Partner: \_\_\_\_\_

**CREDIT INFORMATION:**

**OUTSTANDING LOANS**

Please include Name & Address Acct. Purpose Highest Balance Date Paid in the below space:

Bank-Savings Account: Name of Bank: \_\_\_\_\_  
Account No.: \_\_\_\_\_

Bank-Checking Account: Name of Bank: \_\_\_\_\_  
Account No.: \_\_\_\_\_

If a "Yes" answer is given to any of the following questions explain in the space provided below:

(a) Have you any outstanding judgments? Yes [ ] No [ ]  
\_\_\_\_\_

(b) Have you declared bankruptcy in the past seven years? Yes [ ] No [ ]  
\_\_\_\_\_

(c) Have you had property foreclosed upon or given title or deed in lieu? Yes [ ] No [ ]  
\_\_\_\_\_

(d) Are you a co-maker or endorser on a note? Yes [ ] No [ ]  
\_\_\_\_\_

(e) Are you a party to a lawsuit? Yes [ ] No [ ]  
\_\_\_\_\_

(f) Are you required to pay alimony, child support, or separate maintenance? Yes [ ] No [ ]  
\_\_\_\_\_

(g) Have you ever been involved in a Landlord/Tenant action or an eviction action? Yes [ ] No [ ]  
\_\_\_\_\_

**ADDITIONAL INFORMATION:**

How did you find out about this apartment?

Reason(s) for moving:

**REFERENCE INFORMATION:**

**Personal Reference (Relative)**

Name: \_\_\_\_\_

Address:

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

**Personal Reference (Not Related)**

Name: \_\_\_\_\_

Address:

Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

**The above information is for the purpose of obtaining a credit report through LSA who cannot be responsible for any misleading information received from outside sources.**

I/we hereby certify that I/we are at least eighteen (18) years of age and that the information voluntarily - given on this form is true and correct. If any information is found to be incorrect, incomplete or missing then this application may be automatically denied.

I hereby give my approval authorizing you, to release to Westminster Arch Associates complete information concerning my base pay and average earnings, or any other pertinent information. It is understood by filling in this form I am authorizing Westminster Arch Associates to verify all the information given.

X \_\_\_\_\_  
Applicant's Signature with date

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**THIS SPACE FOR OFFICE USE ONLY**

Apartment Number: \_\_\_\_\_

Move-in Date: \_\_\_\_\_

Monthly Rent: \_\_\_\_\_

Initials: \_\_\_\_\_