Birchwood Estates Realty RENTAL APPLICATION

BIRCHWOOD ESTATES · HOLLY RIDGE · LILAC MEADOWS · MAPLE LEAF VILLAGE · THE ORCHARDS

64 Marimar Dr, Old Forge, PA 18518
Cell 570-840-3475 · Office/Fax 570-562-1685 · GAD525@aol.com

Before you start

- Fill this out on screen (open it in a browser or Adobe Reader) and save it, or print it and fill it in by hand.
- We never ask for your Social Security number or bank account numbers on this form. If your application moves forward, you'll get a separate, secure request from our screening service to authorize a credit check.
- Each adult (18+) who will live in the home applies, either on their own form or as the co-applicant.
- Return it by email to GAD525@aol.com, by fax to 570-562-1685, or in person at our office.

1. THE HOME YOU'RE APPLYING FOR

Community: ☐ Birchwood Estates ☐ Holly Ridge Apartments ☐ Holly Ridge Townhomes ☐ Lilac Meadows ☐ Maple Leaf Village ☐ The Orchards

Apartment / townhome or address (if known) | Bedrooms | Monthly rent quoted | Desired move-in date

Lease length: ☐ 12 months ☐ Other

If other, how many months? | Total number of people who will live in the home

How did you hear about us? ☐ Website ☐ Facebook / Instagram ☐ Zillow or listing site ☐ Sign / drive-by ☐ Current resident ☐ Other

If a resident referred you, or other, please tell us

2. APPLICANT

First name | Middle | Last name | Date of birth (MM/DD/YYYY)

Other names used (maiden, previous) | Cell phone | Other phone

Email | Photo ID type (driver's license, state ID, passport) | Issuing state

Best way to reach you: ☐ Call ☐ Text ☐ Email

Do you smoke or vape? ☐ Yes ☐ No

3. CO-APPLICANT (IF APPLYING TOGETHER)

First name | Middle | Last name | Date of birth (MM/DD/YYYY)

Other names used (maiden, previous) | Cell phone | Other phone

Email | Photo ID type (driver's license, state ID, passport) | Issuing state

Best way to reach you: ☐ Call ☐ Text ☐ Email

Do you smoke or vape? ☐ Yes ☐ No

Relationship to applicant

4. OTHER PEOPLE WHO WILL LIVE IN THE HOME

List everyone else who will live with you. Each adult (18 or older) listed here will also need to complete an application.

Full name | Relationship to applicant | 18 or older? (Yes / No)

Full name | Relationship to applicant | 18 or older? (Yes / No)

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5. WHERE YOU'VE LIVED (LAST 3 YEARS)

Start with where you live now. If you've lived there less than 3 years, add your previous home. We may contact your current and previous landlords.

CURRENT HOME

Street address | City | State | ZIP

Move-in (MM/YYYY) | Move-out (MM/YYYY) | Monthly rent or mortgage | Rent, own, or other?

Landlord or management company | Landlord phone | Landlord email

Reason for leaving

PREVIOUS HOME

Street address | City | State | ZIP

Move-in (MM/YYYY) | Move-out (MM/YYYY) | Monthly rent or mortgage | Rent, own, or other?

Landlord or management company | Landlord phone | Landlord email

Reason for leaving

6. EMPLOYMENT AND INCOME

List your current job. If you've been there less than 2 years, add your previous job in the notes line. You may be asked for recent pay stubs, an offer letter, or a benefits letter.

APPLICANT

Employer | Job title | Start date (MM/YYYY)

Supervisor or HR contact | Phone | Gross monthly income (before taxes)

Status: ☐ Full-time ☐ Part-time ☐ Self-employed ☐ Retired ☐ Student ☐ Other

Employer address / previous employer notes

CO-APPLICANT

Employer | Job title | Start date (MM/YYYY)

Supervisor or HR contact | Phone | Gross monthly income (before taxes)

Status: ☐ Full-time ☐ Part-time ☐ Self-employed ☐ Retired ☐ Student ☐ Other

Employer address / previous employer notes

OTHER INCOME

Include any other income you want us to consider (Social Security, pension, disability, housing voucher, etc.). You don't need to list alimony or child support unless you want it considered.

Source | Monthly amount | Who can verify it? (name / phone)

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7. EMERGENCY CONTACT AND REFERENCES

Please list people who do not live with you. References should not be relatives.

EMERGENCY CONTACT

Name | Relationship | Phone | Email

PERSONAL REFERENCES

Name | How you know them | Phone | Years known

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8. VEHICLES

List every vehicle that will be parked on the property. More than two? Add them in the notes in section 10.

Year | Make | Model | Color | Plate # | State

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9. PETS

Pet policies vary by community; ask us about yours. Assistance animals (service and support animals) are not pets. You may request a reasonable accommodation at any time.

Will any pets live in the home? ☐ Yes ☐ No

Type (dog, cat, etc.)	Breed	Weight (lbs)	Age	Spayed / neutered?	Vaccines current?

10. RENTAL HISTORY QUESTIONS

A "yes" answer does not automatically disqualify you. Please explain so we have the full picture.

Has an eviction been filed against you in the last 7 years?	☐ Yes	☐ No
Have you ever been asked to leave a rental, or left before your lease ended?	☐ Yes	☐ No
Do you owe money to a current or past landlord?	☐ Yes	☐ No
Have you filed for bankruptcy in the last 7 years?	☐ Yes	☐ No

If you answered yes to any question, please explain (dates and what happened)

Anything else you'd like us to know?

11. AGREEMENTS AND SIGNATURES

Each applicant initials every statement and signs below.

APPLICANT	CO-APP	
		The information in this application is true and complete to the best of my knowledge. False or missing information may result in denial of this application or termination of a lease.
		I authorize Birchwood Estates Realty to verify this information, including my rental history, employment, income, and references. I understand a credit and background check will be requested through a screening service, and I will be asked to authorize it separately.
		This application is not a lease. It does not create any obligation for the landlord or reserve a home until a lease is signed by both parties.

Applicant printed name	Applicant signature (typing your name counts)	Date
Co-applicant printed name	**Co-applicant signature**	**Date**

FOR OFFICE USE ONLY

Date received	Received by	Fee paid	Deposit	Home / rent	Decision / date