

415 South 20<sup>th</sup> Street • Philadelphia PA 19146 • TEL: 215-546-2030 • FAX: 215-735-2508 • EMAIL: info@as-realty.com

**ADDRESS:**

**RENT:**

**MOVE IN DATE:**

**NUMBER OF PEOPLE MOVING IN:**

**LIST PETS (If any):**

**UTILITIES INCLUDED:**

**TERMS: One year lease. One Month Security. First/Last Month Rent**

\*\*\*\*\*

**APPLICANT:**

**Name:** \_\_\_\_\_ **SS#** \_\_\_\_-\_\_\_\_-\_\_\_\_

**Address:** \_\_\_\_\_ **Zip** \_\_\_\_\_ **Tel#** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Current Landlord:** \_\_\_\_\_ **Tel.** \_\_\_\_\_

**Reason for Leaving:** \_\_\_\_\_

**Rent:** \_\_\_\_\_ **per month.**

**Prior Landlord:** \_\_\_\_\_ **Tel.** \_\_\_\_\_

**Employer:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Tel.:** \_\_\_\_\_

**Supervisor:** \_\_\_\_\_

**Salary:** \$ \_\_\_\_\_ **per week.**

**Other Income:** \_\_\_\_\_

By my signature I certify that the information provided in support of this application is true. I also authorize the use of all information provided for the purpose of verification and credit check.

\_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature**