



WALLINGFORD ESTATES

ITEMS NEEDED TO PROCESS RENTAL APPLICATION



- ✦ \$35 application fee for everyone over the age of 18m in a money order
- ✦ 2 forms of ID—drivers license and social security card
- ✦ 2-4 current paystubs showing YTD
- ✦ \$500 money order to hold the apartment.this is to insure if approved and this is including in moving cost. If not approved it will be returned to you. This only happens pre-qualifying after approved this or any other monies are non- refunded but can be used up to 6 months for reapplying purposes.

Wallingford Estates

Application criteria for Prospective Residents

Equal Housing: Chester Reality, LLC conducts business in accordance with the Fair housing Act. We do not discriminate on the bases of Race, Religion, National Origin, sex, familiar status, marital status, ancestry, sexual orientation, lawful sources of income, disability or handicap, or any other basis protected by applicable state or local fair housing laws.

Applicants: Each applicant that is 18yr of age or older must complete an application and if the application is approved, sign the lease as a lease holder. Applications are to be completed in full, applications containing false, misleading or incorrect information will be denied.

Occupancy Limitations: No more than 2 individuals per bedroom may occupy an apartment unit.

Qualification Guidelines:

All applicants must provide valid driver's license, Military ID, passport or Government Issued ID.

- Proof of social security
- Proof of Legal alien status (valid Permanent resident card or Visa) federally issued ID number, immigration Status must be valid to meet or exceed the lease end date.

Income employment: Each applicant must provide Proof of income consisting of (2) if biweekly paid or signed Letter of Intent from new employer on company letterhead and proof of any other income. If self-employed submit last two personal tax returns or notarized statement from applicants CPA. Full time students must submit a copy of enrollment verification to accredited school/university.

Background Check and Credit Authorization: It is the Company's policy to perform one or more reference Checks including, but not limited to a Credit report from a consumer credit reporting agency and if warranted a Criminal report and/or Landlord/Employment History report.

Your application for rental may be denied based on the following:

- False, misleading or incorrect information on application .Poor Credit .Criminal Record .Poor rental or Mortgage payment history .Lack of sufficient income

*Cancellation or Denied Applications: Application fees are non-refundable. If applicant(s) are approved and in the event of withdrawal or cancellation any or all monies will be forfeited but can be used up to 1 year for move in purposely only. They cannot be returned only used for rental purposes.

By signing below, I verify that I have read and understand the criteria from which my application will be processed.

Applicant #1 Signature_____ Date_____

Applicant #2 Signature_____ Date_____

APPLICATION FOR RESIDENCY

Community: Wallingford Estates

Date Application Received: _____

Address: 2701 Madison Street, E-213
Chester. Pa 19013

Apt Type: _____

Phone: 610-874-3220 Fax: 610-874-9606

Move In Date: _____

Applicant #1 Personal Information/History

Applicant Name: _____ Birthdate: _____ Soc Sec: _____

Present Address: _____ Apt# _____ City: _____ State: _____ Zip code: _____

Landlord/Mortgage Holder: _____

Length of occupancy: _____ Previous Address if less than 2 years in present address:

Home Phone: _____ **Cell:** _____ **Work:** _____

Email Address: _____

US Citizen: Yes [] No _____

Marital Status: Sex: Female [] Male []

Have you ever been filed on for eviction: _____ if yes when _____

Where _____

Employment Information

Present employer: _____ Phone no.: _____

How long employed: _____ Job title: _____ Monthly income: _____

Supervisor: _____ Check here if you are a student: [] Name of School: _____

Additional source of income: _____ Amount: _____

How often received: _____

Applicant #2 Personal Information/History

Applicant Name: _____ Birthdate: _____ Soc Sec: _____

Present Address: _____ Apt# _____ City: _____ State: _____ Zip code: _____

Landlord/Mortgage Holder: _____

Length of occupancy: _____ Previous Address if less than 2 years in present address:

Home Phone: _____ **Cell:** _____ **Work:** _____

Email Address: _____

US Citizen: Yes [] No _____

Marital Status: Sex: Female [] Male []

Have you ever been filed on for eviction: _____ if yes when _____

Where _____

Employment Information

Present employer: _____ Phone no.: _____

How long employed: _____ Job title: _____ Monthly income: _____

Supervisor: _____ Check here if you are a student: [] Name of School: _____

Additional source of income: _____ Amount: _____

How often received: _____

Other Residents

List below all Person(s) other than you who will be living in the Apartment

Full Name	Social Security	Birthdate	Sex	Relation

OTHER INFORMATION

Driver license #: _____ State: _____ Expiration: _____

Do you own a Car? Yes [] No [] If yes how many? _____

Car one:

Year: _____ Model: _____ Make: _____ Color _____

License Plate: _____ State: _____

Car two:

Year: _____ Model: _____ Make: _____ Color _____

License Plate: _____ State: _____

Who do we contact in case of an emergency? (Someone who is not living with you)

Name: _____ Relation: _____

Cell Number _____ Work Number/Email _____

Do you have any pets you wish to have in your home? Yes [] No []

If yes, what kind of pet? How many? _____

Have you ever filed Bankruptcy? _____

[] Chapter 7- Date Discharged: _____

[] Chapter 13- Confirmation Hearing date: _____

Applicant Statement

I the undersigned applicant make the application to rent on the date listed on the first page and declare that the information and representation contained in and with this application to the best of my knowledge and belief true and correct. I also understand that in the event of acceptance of this application if fail to take possession of the apartment after the application is approved all deposits made in connection with the application will be forfeited to the Owner as compensation for the processing of the application and loss of the rental of the unit. I consent to any and all inquiries made by the Owner or Agent(s) is necessary to obtain references and to verify the information in this Application for Residency and agree upon request to provide documentary evidence of income of all proposed occupants including federal income tax information. I authorize Owner or its Agent(s) to order and review one or more consumer reports relating to me including but not limited to: credit history, rental history (including with other properties owned by property Owners affiliated with landlord) and criminal history. I further authorize Owner or its Agent(s) to order, review or investigate consumer reports relating to me and to continue to obtain, review or investigate consumer reports relating to me both during the duration of any lease or agreement I may enter into a result of this application and anytime thereafter including for the purposes of collection of amounts I may own under any lease or other agreement. I further authorize and direct all employers, financial institutions, banks, creditors, residential managers/landlords to release any and all information relating to me to Owner or its Agent(s). In addition, I understand and authorize Owner or its Agent(s) to obtain and use consumer report information relating to me (including, but not limited to a credit score) for the purpose of conducting research into statistical credits, models and evaluating the performance of various scoring, models and sources of consumer reporting information, including but not limited to criminal conviction and skip tracing/eviction databases. I understand that if this application is approved all information provided herein will become part of the lease.

A Non -refundable Fee of \$35.00 (per applicant) is due at the time of Application

Applicant #1 Signature: _____ **Date:** _____

Applicant #2 Signature: _____ **Date:** _____

Agent(s) Name: _____ **Dates:** _____