



Application Criteria

Application:

- All applications must be filled out completely and truthfully. You must be 18 years of age or older to submit an application.
- Please submit your application, with the \$100 application fee*, payable to Hill House by check or money order, along with completed employment, residency, and bank verification forms.
 - * \$50 of the application fee is non-refundable and covers the cost of background screening. \$50 is applied first month's rent, refunded or forfeited.

Income Requirement:

- Our policy is to carefully review the credit, employment, and financial data you submit; we accept applicants whose credit history is excellent and whose employment/income will reasonably support their rental obligations.

Employment Verification:

- Please submit two consecutive payroll stubs, (2) years of Federal income taxes, OR a letter of new hire.

Residency Verification:

- If you are currently renting or have a mortgage, please sign the attached Residency Verification form. This form will be submitted to your landlord or Mortgage Company to verify your payment history.
- If you do not rent or have a mortgage, please provide reasoning.

Credit Verification:

- Each applicant will be processed through a credit and background check. Applicants with poor credit will be denied. We do not allow a guarantor's good credit to substitute for an applicant's poor credit.

Once application has been approved:

- You will review the rental lease agreement with your leasing agent. We will sign the lease at this time.
- Your first month's rent and security deposit (equal to one month's rent) is due (less \$50 from your application fee) at the time of lease signing.

** Hill House reserves the right to deny any applicant for providing false information in reference to (and not limited) their employment history, credit history and/or rental/mortgage history.*

Thank you and we look forward to having you as a resident of Hill House!



RENTAL APPLICATION

IDEAL MOVE-IN DATE: _____ UNIT DESIRED: _____

ALL INFORMATION MUST BE FILLED IN COMPLETELY. (If not applicable mark N/A)

APPLICANT/SPOUSE (*Unmarried Applicants, please fill out separate applications*)

The Following Persons Will Occupy the Above Apartment and Execute Lease Agreement:

Name Date of Birth xxx-xx-_____
SSN

Name Date of Birth xxx-xx-_____
SSN

If more than one person will execute lease, please describe relationship: _____

The Following Persons Will Occupy the Above Apartment for at least 6 months of Lease:

Name Date of Birth xxx-xx-_____
SSN

Name Date of Birth xxx-xx-_____
SSN

If more than one person will execute lease, please describe relationship: _____

WE REQUIRE A COPY OF A CURRENT DRIVER'S LICENSE FROM ALL APPLICANTS

Current Address:

Street: _____ Apt #: _____

City: _____ State: _____ Zip Code: _____

Email Address _____

Phone: _____ Dates: _____ to _____ (*Rent-Own-Other*)

Landlord/Mortgage Co.: _____ City: _____ Phone: _____

Rent/Mortgage Payment: \$ _____ Reason for Leaving: _____

Previous Address (if Current Less than 10 years):

Street: _____ Apt #: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Dates: _____ to _____ (*Rent-Own-Other*)

Landlord/Mortgage Co.: _____ City: _____ Phone: _____

Rent/Mortgage Payment: \$ _____ Reason for Leaving: _____

EMPLOYMENT:

Current Employment: _____

Position: _____ Supervisor _____

Address: _____ City: _____ State: _____

Phone: _____ Dates: _____ to _____ **Income:** _____ (wk/mo/yr)

Previous Employment (if Current Less than 10 yrs) _____

Position: _____ Supervisor _____

Address: _____ City: _____ State: _____

Phone: _____ Dates: _____ to _____ **Income:** _____ (wk/mo/yr)

If retired, Present income _____ per _____

Spouse's Current Employment:

Employer: _____

Position: _____ Supervisor: _____

Address: _____ City: _____ State: _____

Phone: _____ Dates: _____ to _____ **Income:** _____ (wk/mo/yr)

Previous Employment (if Current Less than 10 years): _____

Position: _____ Supervisor _____

Address: _____ City: _____ State: _____

Phone: _____ Dates: _____ to _____ **Income:** _____ (wk/mo/yr)

If retired, Present income _____ per _____

Additional Income: \$ _____ (wk/mo/yr) Source: _____

RENTAL/MORTGAGE HISTORY:

Have you ever been evicted from an apartment? **YES** **NO**

Have you ever been in breach of a rental or mortgage agreement? **YES** **NO**

BANKING HISTORY:

Bank Name: _____ Address: _____

Checking Acct. No.: _____ Savings Acct. No.: _____ Phone _____

ADDITIONAL INCOME:

It will assist us if you can take a minute to explain why you want to lease an apartment at Hill House.

How did you find out about Hill House? _____

Did you visit other properties in the area? If so, which ones? _____

What about Hill House seemed right for your needs? _____

VEHICLE INFORMATION:

Make of Auto: _____ Year: _____ Color _____ License Plate No.: _____ State: _____

Titled in name of: _____

Make of Auto: _____ Year: _____ Color _____ License Plate No.: _____ State: _____

Titled in name of: _____

EMERGENCY CONTACTS: (Three (3) contacts required; family, friend, or co-worker)

1st Emergency Contact: _____ How Related? _____

Address: _____ Home Ph#: _____

Office Ph#: _____ Cell Ph#: _____

2nd Emergency Contact: _____ How Related? _____

Address: _____ Home Ph#: _____

Office Ph#: _____ Cell Ph#: _____

3rd Emergency Contact: _____ How Related? _____

Address: _____ Home Ph#: _____

Office Ph#: _____ Cell Ph#: _____

I recognize that as a part of the procedure for processing my application, an investigative consumer report may be prepared whereby information is obtained through credit reports and personal interviews with neighbors, friends, employers, and landlords. This inquiry may include information as to my character, general reputation, personal characteristics, mode of living, and ability to make rental payments. I consent to such an investigation and understand that I may have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation.

Signature of Applicant

Date

Signature of Applicant

Date

Leasing Agent

Date

Wait List Applicant: Applicant understands that rent cannot be guaranteed at this time: Initial _____



SOCIAL SECURITY NUMBER VERIFICATION

To better protect the sensitivity of your personal information, we require that you provide your social security number(s) on this separate sheet of paper. Upon completion of your credit check, this document will be destroyed.

The Following Persons Will Occupy the Above Apartment and Execute Lease Agreement:

_____-_____-_____
Name SSN

_____-_____-_____
Name SSN

The Following Persons Will Occupy the Above Apartment for at least 6 months of Lease:

_____-_____-_____
Name SSN

_____-_____-_____
Name SSN

HILL HOUSE APARTMENTS
201 W. Evergreen Avenue
Philadelphia, PA 19118
Office: 215-248-2373
Fax: 215-247-2820



EMPLOYMENT VERIFICATION

(Please Print)

Applicant's Name: _____

Company Name: _____

Company Address: _____

Company Phone Number: _____ Company Fax Number: _____

I hereby give my permission for my employer to release the following information:

Applicant's Signature

Date

TO BE COMPLETED BY EMPLOYER:

To Whom It May Concern:

The employee listed above has applied for tenancy at Hill House Apartments. It is necessary that you provide us with the following information as soon as possible so that we can continue to process the rental application:

Employee's Position: _____

Salary: _____

Probability of Continued Employment: _____

Comments: _____

Employer's Signature

Date

Thank you for your cooperation in this matter. Please return to Hill House Apartments, fax number (215) 247-2820, or call (215) 248-2373.

RENTAL VERIFICATION REQUEST



Landlord: _____

Phone: _____ Fax: _____

TENANT'S NAME _____

TO BE COMPLETED BY LANDLORD

The applicant listed above has applied for residency with Hill House and has authorized via the signature below, for you to release the following information:

DATE OF LEASE: From: _____ To: _____

MONTHLY RENT PAID \$ _____

WAS RENT ALWAYS PAID ON TIME? **YES NO**

IF NO, HOW MANY TIMES WAS THE RENT PAID LATE? _____

DOES THERE STILL REMAIN A DELINQUENCY? **YES NO**

IF SO, HOW MUCH? \$ _____

WAS LEASE RENEWED **YES NO**

WOULD YOU LEASE TO APPLICANT AGAIN? **YES NO**

DID APPLICANT CARE FOR APARTMENT? **YES NO**

ADDITIONAL COMMENTS:

LANDLORD (Signature): _____

Print Name: _____

APPLICANT (Signature): _____

Print Name: _____

Thank you for taking the time to complete this form. If you have any questions, please call me at (215.248.2373). Please fax the completed form to Hill House (215) 247-2820 or mail to: Hill House, 201 West Evergreen Avenue, Philadelphia, PA 19118.

BANK ACCOUNT CONFIRMATION



Bank or Firm: _____

Address: _____

Fax Number: _____

RE: _____
Account Number

Name

Street

City State Zip

To Whom It May Concern:

I/we have applied for rental of an apartment at Hill House Apartments in Philadelphia, Pennsylvania and ask that you furnish them the information requested below:

Applicant Signature Date

Applicant Signature Date

TO BE COMPLETED BY BANK:

Type of Account _____

Date Opened: _____

Current Balance: _____

Terms: _____ Months at _____ per month

Delinquent/Overdrawn: Never _____ Occasionally _____ Often _____

Satisfactory Account: Yes _____ No _____

Bank Representative's Signature Date



APPLICATION AGREEMENT

I hereby apply to lease the above referenced premises for the term and upon the conditions above set forth and agree that the rental is to be payable the 1st day of each month in advance. As an inducement to the Landlord, I warrant that all statements above set forth are true. Should any statement made above be a misrepresentation or an untrue statement of facts, \$100.00 of the application fee will be retained to offset the Landlord’s processing of my application. In addition, if I cancel the application for residency, the full \$100.00 will be retained by Hill House.

I hereby give an application fee of \$100.00 as earnest money:

- \$50.00 towards a non-refundable application processing fee
- \$50.00 applied towards the Security Deposit at time of move-in

Upon my acceptance, deposit of \$50.00 shall be retained as part of the Security Deposit. In the event this application is not accepted or approved, \$50.00 will be returned. I agree to execute a lease agreement contingent on a satisfactory investigative consumer report, to pay the balance of the Security Deposit and the first full month’s rent on or before the date of move-in or the deposit will be forfeited as liquidated damages in payment for the Landlord’s time and effort in processing my inquiry and application. I agree to waive any claim for damages by reason of non-acceptance and I understand that the Landlord may reject this application without stating any reason for doing so.

Signature of Applicant

Date

Signature of Applicant

Date

Received by: _____

In the event someone other than the applicant pays the processing fee, no monies will be refunded to the payee. Only the Applicant may receive money, should a refund be due for any reason. All other terms and conditions listed above apply regardless who of has paid the processing fee.

Signature of Payee other than Applicant: _____