RENTAL APPLICATION INSTRUCTIONS

*DO NOT SEND SECURITY DEPOSIT OR ANY OTHER MOVE-IN FUNDS UNTIL APPLICATION HAS BEEN APPROVED.

*INCOMPLETE RENTAL APPLICATIONS WILL NOT BE PROCESSED.

- 1. All rental properties are NON-SMOKING OR VAPING and NO PETS UNLESS LISTING STATES OTHERWISE.
- 2. Each applicant age 18+ must complete an application for occupancy approval and background check. (Credit check negotiable for applicants 18+, if an individual is residing with a parent or family member and will not be the primary leaseholder.)
- 3. Applicants are required to attach the following:
 - *<mark>Most recent pay stubs</mark> (2) or tax return from most recent year
 - *Copy of driver's license or state issued photo id
- *Any additional items to be taken into consideration please write or type on a separate piece of paper. (For example: credit report issues, relocation coordination, movein time frames, etc.)
- 4. Credit checks may take up to a week to be fully processed.
- *We accept cash, credit/debit card, and money order (no checks). If paying with credit/debit card, please call the Selinsgrove office at 570-743-2165 and ask for the Rental Assistant. APPLICATION FEE IS \$25 per Applicant over 18 years of age. -No Refunds of Application Fee!
- 5. Completed applications and fees should be made payable and submitted to:

Bowen Agency Realtors Attn: Rental Department 1372 North Susquehanna Trail, Suite 110

Selinsgrove, PA 17870 Phone: 570-743-2165

Fax: 570-743-1396

Bowen Agency Realtors Attn: Rental Department 159 South Second St Sunbury, PA 17801 Phone: 570-286-8594

Fax: 570-286-2204

If emailing the application and supporting documents, please email the rental department at rentals@bowenagency.com. You may text questions to one of the rental agents you had been working with: Kelly Straub at 272-444-7343 or Janelle Litchard at 272-444-7341 or Keri Rearick at 570-259-6129.

FILLING OUT THE APPLICATION

Page 1- 1st Box - Acknowledge receipt of notice.

- 1. Date, Print and Sign
- 2. Initial page bottom left.

Page 2-

- 1. Applicant Information.
- 2. Employment Information
- 3. Other Income
- 4. Initial Page Bottom Left.

Page 3-

- 7. Pets
- 8. other information Initial Page Bottom Left.

Page 4-

16. Authorization- initial each one. Sign, print and date.

Social Security Number Authorization

- 1. Full Name: first name, middle initial, last name
- 2. Address
- 3. Social Security Number
- 4. Date of Birth
- 5. Consumer Sign and Date



RENTAL APPLICATION FOR LANDLORD AGENTS

This form recommended and approved for, but not restricted to use by, the members of the Pennsylvania Association of Realtors® (PAR).

	TICE FOR TENANTS T A CONTRACT	•
(Licensee)	hereby states that with	respect to this property (describe property) e following capacity: (check one)
(i) Owner/Landlord of the Property; (ii) A direct employee of the Owner/Landlord; OR (iii) An agent of the Owner/Landlord pursuant to a property		
I acknowledge that I have received this Notice: Date: Print (Consumer)		
Print (Consumer)		Signed (Consumer)
I certify that I have provided this Notice:(Li	censee)	(Date)
LANDLORD'S RELATIONSHI		ROKER
No Business Relationship (Landlord is not represented by a l		
Broker (Company)		
Company License #	State License #	
Company Address	_ Direct Phone(s)	
Company Phone		
Company Fax		
Company Fax	Licensee(s) is (check on	y one);
Landlord Agent (Broker represents Landlord only) Dual Agent (See Dual and/or Designated Agent box below)	Landlord Agent (an	company licensees represent Landlord) h Designated Agency (only Licensec(s) name
Dital Agent (See Dital and/of Designated Agent box below)	above represent Lai	idlord)
	Dual Agent(See Du	al and/or Designated Agent box below)
Transaction Licensee (Broker and Licensee(\ nrovide real estate services	but do not represent Landlord)
Transaction Licensee (Broker and Licensee)) provide real estate services	bill do not represent Enderso
NO ODDOWY INDOM (INVOV)	D. L	Loudland)
PROPERTY INFORMATION (to be supplied by Broker for .	Landiold)
Address	Term	
Move-in Date	Application Deposit \$	
Monthly Rent \$ First Month's Rent \$	Security Deposit \$	
First Month's Rent \$	Last Month's Rent \$	
Rent and Security Deposit checks will be written separately. Are pets permitted? (Yes)(No) May be subject to review, Not		clude guide or support animals.
Non-refundable Pet Fee \$\$	Pet Rent \$ Other	\$
Is rental insurance required for tenants? (Yes) (No)		

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Fax: (570) 743-1396

1 2	1.	APPLICANT INFORMATION (A) The individual listed below is a(n):	(Applican	t) ([] Co-s	igner)	1 64 . 1*		s this forms. If the
3		Each Co-signer must complete an appl	ication for the	Property and	will be consider	ed an "Applica	mi. as delined ii	of the obligations
4		application is approved and the parties enter into a lease, each Co-signer will be individually responsible for all of the obligation of the lease, including rent, fees, damages and other costs. Co-signers will not have the right to occupy the Property as a t						merty as a tenant
5		of the lease, including rent, fees, dam	ages and other	cosis, Co-sig	ners will not no	ive me right to	occupy the riv	sporty no a tomait
6		without Landlord's prior written permiss	sion.					
7		Pull Name		Wante Y	lhana.			
8		Home Phone		WOIK I	710116		· · · · · · · · · · · · · · · · · · ·	
9								
0		How did you hear about the Property? (B) Provide at least two years of history. A		A to !Fuena	annon in mondad			
[1		(B) Provide at least two years of history. A	ltach additional	sneets if more	space is needed.			
12		Present Address & ZIP			lma	(Own)	(Rent)	(Other)
13		From To Ren	t/Mortgage \$		/Jno.			
14		Landlord/Mortgage Co. Name & Phone						
15		Previous Address & ZIP From To Ren				(Oum)	(Rent)	(Other)
16		From To Ren	t/Mortgage \$ _		/mo,	([] Own)	(L) Kond	([] (()
17		Landlord/Mortgage Co. Name & Phone	; ;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;					
18		(C) Is Applicant at least 18 years old?	(Yes) (No)		and he comple	tod for anch ann	licant/carelaner
19		Are you applying with anyone else?	(Yes) (No) A separa	e application in	Conic	mar)	nemmee algher.
20		Name			Applicant	(Co-sig		
21		Mana			(Applicant)	(Co-ai	girer)	
22		Name			(Cappineant)	(Co-si	gner)	
23		Ministra			III I CADDIIVAIN	(Co-si	gner)	
24		Will amone else be occurving the pro-	nerty? ([]	Yes) (No)			
25		If yes, include the full name of any other	er person not lis	ted above who	will be occupying	ng the property	•	
26		Name			18 or older			
27		Name			18 or older			
28		Name			10 01 01001			
29		Name			18 or older	•		
30		Check here if additional inform	ation is attache	ed				
31	2.	EMPLOYMENT INFORMATION						
32		Provide at least two years of history. Attach	additional shee	ts if more spac	e is needed.			
33								
34		in the second se		Position				
35		Employed From10		Phone				
36		Supervisor						
37		Supervisor Gross Income:\$	/mo. OR \$		/hr., for	hrs. per we	ek (on average)	
38		Dravious Employer						
39		To To Table 1 To Ta		Position				
40		City/State		Phone				
41		Supervisor Gross Income:\$	/mo. OR \$		/hr., for	hrs, per we	ek (on average)	
42		Proof of income attached				-		
43		Check here if additional information	heddette et a					
44		OTTO INCOME HEED FOR MONTH	LV EXPENSE	'S				
45	3.	Alimony, child support, or separate main	tenance incom	e need not be	revealed if Ap	plicant does n	ot wish to have	it considered as
46		Alimony, child support, or separate main	acimico mooni	o noou nor oo				
47		basis for paying this obligation.	Amount		So	urce		Amount
48		Source	*					
49								
50								
51		D - 10 1211 11 C- 11	. In attached					
52		Check here if additional information	i is httached			•		
53	4.				Account Type	a.	Balanc	e
54		Bank Name			Account 1 ypo	•		
55		Dank Manic					\$	
56							\$	
57							Ψ	the same of the sa
58		Check here if additional information	n is attached					
							•	

	MONTHLY PAYMENTS Lender Name	Loan Туре I	Balance Duc	Monthly Payment
	Lender Name	\$		\$
		8		\$
		\$		\$
	Check here if additional information is	s attached		
ì.	VEHICLE	all and hands and according a validas		
	Include any cars, trucks, vans, motorcycles, tra Make/Model	Year Co		License Plate/State
7.	Check here if additional information is	s attached		(
	Does any Applicant or Occupant own any pet If yes, provide detail below.	s (guide and support animals not metadou)	([] 100)	(
	Pet1	Pet2	Pet3	
	Type (Cat, dog, etc.)			
	Age			
	Gender			
	OTHER INFORMATION			
	(Yes) (No) Have you ever declared b	ankruptcy or suffered foreclosure?		
	If yes, list any payments: \$	on your mortgage?		
	(Yes) (No) Have you been evicted or	sued for unpaid rent or damages to leased pr	operty?	
	/ No. / No. Hove you ever refused to	nay rent for any reason?		
	(Voo) (No) Have you ever been conv	ricted of or entered a plea of guilty or nolo cor	ntendere for a fe	lony or misdemeanor?
	1 1000 TI	are you been obligated to now common under t	anv order(s) of r	ecora? 11 ves:
		Damentia Polationa File or Docket	Number	
	County	Domestic Relations File or Docket Are you delinquent?	Number:	
	County	Domestic Relations File or Docket Are you delinquent?	Number:	
	County Amount If you answered "yes" to any of the abov "yes" answers provided above:	Are you delinquent? re questions, you may not be automatically	v disqualified fi	om residency. Please explain any
	County Amount If you answered "yes" to any of the abov "yes" answers provided above:	Domestic Relations File or Docket Are you delinquent? re questions, you may not be automatically	v disqualified fi	om residency. Please explain any
	County Amount If you answered "yes" to any of the abov "yes" answers provided above:	Domestic Relations File or Docket Are you delinquent? re questions, you may not be automatically	v disqualified fi	om residency. Please explain any
9.	County	Domestic Relations File or Docket Are you delinquent? re questions, you may not be automatically attached	v disqualified fi	om residency. Please explain any
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	County	Domestic Relations File or Docket Are you delinquent? re questions, you may not be automatically attached ition as it is shown unless otherwise provided	v disqualified fi	om residency. Please explain any
-	County	Domestic Relations File or Docket Are you delinquent? re questions, you may not be automatically attached ition as it is shown unless otherwise provided	v disqualified fi	om residency. Please explain any
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21	App	licant Nar	ne	
122 123 124		nddit ndvis	hich the Property is located may have enacted an ordinance or other law that extends the protectional classes of individuals, such as gay, lesbian, bisexual and transgender individuals and conjuged to check with your local municipality, representative from the Pennsylvania Human Relations of a fact the printers.	1162' Dioker and Pangiora are
125 126 127		(B) The	ney for further guidance. Fair Housing Act prohibits rental practices which have a discriminatory effect on members of probable bans on offering housing to individuals based on arrests or convictions without a case-by-case	2 N22C22Hight of televant mini-
128 129 130 131		the i of thesa	ng factors. Consideration of an applicant's criminal history must be limited to convictions and stature and severity of the offense, the amount of time that has passed since the criminal conduction will serve a substantial, legitimate, nondiscriminatory interest. Selective use of a pretext for intentional discrimination based on race, national origin, or other protected charact	an applicant's criminal history
132		the /	Act, as well.	
133	14.	FAIR CH	REDIT REPORTING ACT and or Broker denies your application based in whole or in part on any information contained	in the consumer report author-
134 135 136 137 138		ized by p and must phone nu	paragraph 16 of this Application, the Landlord or Broker must provide you with oral, written or t provide to you: (1) the name, address, and telephone number of the consumer reporting ages number established by the agency if the agency compiles and maintains files on consumers on a n	ncy (including a toll-free tele- ationwide basis) that furnished cation and is unable to provide
139 140 141		you with	the specific reasons why your application was denied, (3) a numerical credit score, the range of used, up to four of the key factors that led to the denial, and the date the credit score was credit as a five constant of your consumer report from the consumer reporting agency, and (5) information as	ated (4) information about how about how to dispute the accu-
142 143		racy or c	completeness of any information in a consumer report furnished by the agency. If the Landiord	or prior landlord), the
144		Landlord	or Broker must provide you with notice about your right to make a written request to discover the na	ture of that information.
145	15.	SPECIA	L CLAUSES	
146 147 148		(A) The	e following are part of this Application if checked: Advanced Payment Addendum(PAR Form APA)	
149		Ħ		
150		(B) Add	ditional Terms:	
151	•			
152		1 X IMIX C	DATA TEADY	
153 154 155	16.	By initia	ORIZATION ling below, Applicant makes the following authorization(s): Applicant authorizes Landlord or Broker for Landlord to obtain any information deeme	ed necessary to evaluate this
156 157 158 159 160			Application. This information may include, but is not limited to, credit reports, criminal history, verification of employment and salary, employment history, vehicle records, and Landlord may report to Landlord any information obtained by Broker for Landlord for Applicant acknowledges that all information in the Application is true and correct. Applicant presents false or incomplete information Landlord may reject this Application. Applicant unincomplete information may result in forfeiture of any payments made in connection with this Rent	evaluation of the Application. acknowledges that if applicant aderstands that giving false or
161 162			Applicant understands and acknowledges that Aplicant's social security number, driver's lic	ense number, date of birth, or Landlord to evaluate this appli-
163 164 165			cation. If requested, Applicant agrees to provide the information on a separate form such Authorization (PAR Form SSA). Failure to provide this information may result in the denial of you	r application.
166 167		<u> </u>	Applicant agrees that Broker(s), his/her agent(s) and/or employee(s) may provide Appli individual taxpayer identification number, driver's license information and date of birth to reporting companies, or others as necessary for obtaining reports or information from a cre	dit reporting agency, determin-
168 169 170 171 172 173			ing the existence of domestic liens, or for obtaining a criminal background report (Applicant understands that Brokers have no control over the use of any information a party and agrees to release and hold Brokers harmless from any and all liability for a closure by any third party of the information or reports disclosed by Broker pursuant ization.	fter it is disclosed to a third my misuse or subsequent dis-
174			Applicant authorizes the Broker for Landlord to contact the Applicant directly.	
175	11	IAVE RE	AD AND AGREE TO THE PROVISIONS AS STATED.	•
176	Αĭ	PLICAN	T SIGNATURE	DATE
177	Al	PLICAN	T NAME	DAIL

SOCIAL SECURITY NUMBER AUTHORIZATION

This form recommended and approved for, but not restricted to use by, the members of the Pennsylvania Association of Realtors (PAR).

1	CONSUMER NAME (FULL)
2	CONSUMER ADDRESS
3	CONSUMER SOCIAL SECURITY NUMBER
4	CONSUMER DATE OF BIRTH
5	BROKER
6	A separate authorization form must be completed for each consumer involved in a real estate transaction.
7	I agree that Broker(s), his/her agent(s) and/or employee(s) may provide my social security number to lenders, title agencies, credit
8	reporting companies, or others as necessary for obtaining reports or information from a credit reporting agency, determining the exis-
9	tence of domestic liens, obtaining a criminal background report (for prospective tenants only), ordering a mortgage payoff or for purposes of satisfying requirements of the Patriot Act.
1	CONSUMER UNDERSTANDS THAT BROKER HAS NO CONTROL OVER THE USE OF ANY INFORMATION AFTER IT IS DISCLOSED TO A THIRD PARTY. CONSUMER AGREES TO RELEASE AND HOLD BROKER HARMLESS FROM
2	IT IS DISCLOSED TO A THIRD PARTY. CONSUMER AGREES TO RELEASE AND HOLD BROKER HARMELESS FROM
3	ANY AND ALL LIABILITY FOR ANY MISUSE OR SUBSEQUENT DISCLOSURE BY ANY THIRD PARTY OF THE
4	INFORMATION OR REPORTS DISCLOSED BY BROKER PURSUANT TO THE TERMS OF THIS AUTHORIZATION.
5	Consumer's signature serves as an acknowledgement of receipt of a copy of this authorization.
6	CONSUMERDATE