



Old Liberty Land
& Development Co., LP
(717) 446-0105
<http://www.oldlibertyland.com>

Property: _____
Apt #: _____
Rent: _____

Thank you for your interest in our apartment homes.
Please complete all requested information on this form.

Date of Application _____ Desired Date of Occupancy _____

Type and Size of Apartment Wanted (No. of Bedrooms, etc.) _____

General Information

Applicant's FULL NAME _____

Social Security No. _____ Driver's License No. / State _____

Co-Applicant's FULL NAME _____

Social Security No. _____ Driver's License No. / State _____

Full Name of All Other Occupants _____ Relationship to You _____

How did you hear about our property? _____

Residence History

Present Address _____

Present Telephone _____ Move in Date _____ Move Out Date _____

Present Landlord or Mortgage Co. _____ Telephone _____

Monthly Payment \$ _____ Reason for Moving _____

Previous Address _____

Previous Telephone _____ Move in Date _____ Move Out Date _____

Previous Landlord or Mortgage Co. _____ Telephone _____

Monthly Payment \$ _____ Reason for Moving _____

Employment Information

Current Employer _____ Start Date _____ End Date _____

Employer's Address _____

Telephone _____ Fax _____

Position _____ Supervisor _____

Gross Monthly Salary \$ _____

Other Information

Have you or your co-applicant(s) ever:

	You		Co-Applicant(s)	
Been sued for non-payment of rent?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Been evicted or asked to move out?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Broken rental agreement or lease?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Been sued for damage to rental property?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Declared bankruptcy?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Been convicted of a felony?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

IN CASE OF EMERGENCY PLEASE CONTACT

Name _____ Relationship _____

Address _____ Phone _____

I hereby make application for an apartment and certify that this information is correct. I authorize you to contact any references that I have listed. I also authorize you to obtain my consumer credit report from your credit reporting agency, which will appear as an inquiry on my file.

Applicant's Signature _____

Co-Applicant's Signature _____

Date Signed _____