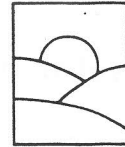


Rental Application



Christiana

Commonwealth/Emory Hill & Associates, Inc. Property Management Division

HOW DID YOU HEAR ABOUT US?

M E A D O W S

To the Applicant

We sincerely thank you for your application. Please help us promptly process this application by clearly providing all of the required information. An application fee of _____ must accompany this application before it will be considered. The fee is non-refundable and is not a part of the security deposit.

Date of Application _____ Deposit Amount Paid \$ _____

Type and Size of Unit Wanted _____

Residence Assigned _____

Desired Move-In Date _____ Date Lease Begins _____

Personal Information

Applicant's Full Name _____ Home (_____)
Phone Work (_____)

Date of Birth _____ Marital Status _____ Social Security Number _____

Other Residents (Co-Applicant and Dependents) _____ Social Security # _____ Relationship _____ Date of Birth _____

Please Go To Next Page

Residence History For Past 3 Years Beginning With Most Current

Current Address

Month and Year Moved In	Reason for Leaving	
Owner or Agent	Rental Amount \$	Landlord's Phone ()

Previous Address (If Within 3 Years)

Month and Year Moved In	Moved Out	Reason for Leaving
Owner or Agent	Rental Amount \$	Landlord's Phone ()

Previous Address (If Within 3 Years)

Month and Year Moved In	Moved Out	Reason for Leaving
Owner or Agent	Rental Amount \$	Landlord's Phone ()

Employment Information

Applicant's Status: Employed Full-Time Employed Part-Time Student Retired Unemployed

Current

Employer Previous

Address

Date(s) Employed _____ Employed As _____

Supervisor _____ Supervisor's Phone () _____

Salary \$ _____ Per _____ If employed by above less than 6 months, give name and address of

Previous Employer or School

If there are other sources of income you would like considered, please list income source and person (banker, employer, etc.) whom we could contact for confirmation. You do NOT have to reveal alimony, child support or spouse's annual income unless you want it considered in this application.

Amount \$ _____ Source _____

Amount \$ _____ Source _____

Co-Resident's Status: Employed Full-Time Employed Part-Time Student Retired Unemployed

Current

Co-Resident's Employer Previous

Address

Date(s) Employed _____ Employed As _____

Supervisor _____ Supervisor's Phone () _____

Salary \$ _____ Per _____ Social Security Number _____

