

Pascarella Leasing Office Application Package

Thank you for choosing one of the PDM Estates, LLC Properties. Attached you will find the application. To process the application you will also need the following items returned with it:

- Photo ID
- Proof of Income
- Social Security Card
- Signed Application
- Signed Landlord Reference

There is a <u>non-refundable</u> \$35 application fee for each person over the age of 18 that will be residing in the apartment. This fee allows us to perform a full background credit and criminal check. No personal checks will be accepted for first payment. No credit / debit cards are accepted.

Please be sure to completely fill out all parts of the application. Signatures and Initials are required throughout. We are unable to process any incomplete Applications. If you have any questions, please contact our Office.

Once you have all of the items listed above, please return the application in person to our main office inside The Willows Apartments located at 925 7th North Street, Office, Liverpool, NY 13088. If you have questions we can be reached at (315) 457-1305 Monday through Friday between 9:00am – 5:00pm and Saturdays between 10:00am – 2:00pm.

Pets may be approved with restrictions. If a Pet is approved there is a separate Security Deposit and Monthly Fee per pet. Newly Remodeled Apartments Do Not Accept Pets, we apologize for any inconvenience.

Property:	City	James	Heritage Hills	Willows	□ Northwood
Size:	Studio	1 Bed	2 Bed /1 Bath	2 Bed/2 Bath	3 Bed / 2 Bath Bed
Included Utilities:	Hot/Cold	Water	Heat/Hot Water	Heat/Hot Wat	ter/Electric
Security Deposit: Monthly Rent:		*Upon approva Monthly	1		
925 7th North S	St., Office • Liv	verpool, NY • 1	3088 • p: 315.457.1305	5 • f: 315.457.0728	3 • pdmestates.com

PDM Estates Rental Application

(Complete for each applicant over 18 years of age)

PERSONAL	
FIRST NAME MI LAST NAME CELL PHONE: () - EMAIL: BIRTH DATE: // SOCIAL SECURITY# - BIRTH DATE: // SOCIAL SECURITY# DRIVERS LICENSE: State # Convicted, plead guilty, no-contest, received probations, deferred adjudication, court-ordered supervision or pre-trial. Diversion for a felony, s misdemeanor assault against another person? YES / NO circle one	
ADDRESSES	
CURRENT ADDRESS: Address Apt # City/State/Zip Since/ Own Rent \$ Landlord Phone () Phone ()	
Reason for leaving?	
Address Moved In Moved Out	
Monthly Rent Landlord Phone ()	
Have you ever been evicted? Have you ever been sued for rent? Have you ever been sued for property damages? Have you ever broken a lease? If yes explain:	
EMPLOYMENT	
CURRENT EMPLOYER Address	Name
Start Date to Position Hourly/Salary Hours Per Week	
Supervisor Phone () Email	
(Previous needed only If less than 1 year at current)	
EMPLOYER Address From/ to/ Position Weekly Income \$ Supervisor Phone () ADDITIONAL INCOME	-
Amount \$ Weekly/Biweekly/Monthly/Yearly Source Amount \$ Weekly/Biweekly/Monthly/Yearly Source	_

FINANCIAL REFERENCE

ank/Credit Union					
	I	EMERGENCY CONTAC	T / REFERENCE		
In the event of serious illness t the common areas.	, death, or other circumstance	s that would make you un	available, the emergenc	y contact can remove your property	from your un
ame		Relationship			
ddress			Cell: ()	Home ()	
ERSONAL REFERENCE					
ame			Relationship)	
ddress			Cell: ()	Home ()	
		VEHICLE INFOR	MATION		
EHICLE #1					
earMake	Model	Color	Plate #	State:	
EHICLE #2					
earMake	Model	Color	Plate #	State:	
-		PETS			
It is understood that no ca	ats or dogs are permitted u	nless otherwise approve	ed by management up	on signature of a pet lease *	
N / NY					
Pet Name: Туре		Gende	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
Breed		Size (1			
Color		,	,		
Veterinarian Name and Numb		Age	nations up to date?		
	JC1	vacci	nations up to date?		
Pet Name:					
Туре		Gende	er]

 Type
 Gender

 Breed
 Size (lbs)

 Color
 Age

 Veterinarian Name and Number
 Vaccinations up to date?

LIST ALL OCCUPANTS

Total number of occupants:

Name	Relationship <u>SELF</u>	_DOB//	_ Phone # ()
Name	Relationship	DOB//	Phone # ()
Name	Relationship	DOB//	Phone # ()
Name	Relationship	DOB//	Phone # ()
Name	Relationship	DOB//	Phone # ()
Name	Relationship	DOB//	Phone # ()

Initial Below to Acknowledge:

_____ Applicant acknowledges that any application fee(s) received by PDM Estates, LLC are non-refundable.

_____ Applicant acknowledges that no deposit money will be returned if tenant does not occupy the apartment through no fault of the landlord.

_____ Applicant authorizes the owner to contact sources listed as deemed necessary to verify applicant information.

_____ All information is true, accurate and complete to the best of applicant's knowledge. Owner reserves the right to disqualify tenant if information is not as represented.

The landlord and tenants shall comply with all Federal, State and local laws prohibiting discrimination in housing on the grounds of race, color, sex, creed, national origin, marital status, children, disability or age.

Any person or firm is authorized to release information about the undersigned upon presentation of this form or a photocopy of this form at any time.

X

APPLICANT

DATE

Applicant hereby gives PDM Estates, LLC. permission for any person or firm to release information to approve or deny the undersigned for residency upon presentation of this form or a photocopy of this form at any time.

APPLICANT:	DATE:
ADDRESS:	

If Application is Approved and Applicant wishes to hold an Apartment a Holding Deposit in the amount of the first month's rent will need to be received.

Landlord has received a holding deposit in the amount of one month's rent from applicant. Landlord agrees that in consideration of the holding deposit, it will remove the abovementioned apartment from the market. Applicant acknowledges that the holding deposit is <u>non-refundable</u>. The holding deposit will <u>not</u> be returned if the applicant does not occupy the apartment. Upon execution of the lease agreement, the holding deposit will be applied to the security deposit.

I Have Read the Above and Agree with the Terms:

Х

Signature of Applicant

TO BE COMPLETED BY CURRENT / PREVIOUS LANDLORD

The information below will be held in confidence and used only in connection with the rental application. Any statements on your part, as to the responsibility or standing of any person, are a matter of opinion and are given as such and solely as a matter of courtesy and for which no responsibility is attached to you. Your prompt completion and return of this form will be appreciated. Please return to PDM Estates, LLC by fax to (315) 457-0728.

RENTAL PAYMENT:

A: Is (was) applicant current on rent?	_ If no, how much do they o	we? \$
B: Amount paid per month: \$	_ What is included?	
C: Has (had) he/she ever been late?	How often?	Late Fee?
D: Have (had) you ever begun eviction proceedings for	or non-payment?	When?
E: Have (had) he/she had checks returned for non-sufficient funds? How Many?		

CARING FOR UNIT:

A: Does (did) the applicant keep unit clean?

B: Has (had) applicant damaged unit?

C: Has (had) applicant paid for damages?

D: Will you (did you) keep any part of the security deposit?

GENERAL INFORMATION:

A: Dates of applicants tenancy From _____ To _____ Lease Expiration: _____

B. Did the tenant give proper notice to move?

C: Have (had) there been any complaints about the tenant? _____ If so, please explain _____

D: Has (had) the applicant given you any false information?

E: Would you rent to this tenant again? _____ If not please explain: _____

DATE

SIGNATURE/TITLE OF PERSON COMPLETING FORM

PHONE NUMBER

TITLE