

Special Housing Rental Application

C.P.D.C
207 East Cherry Street
PO Box 792
Clearfield PA 16830
Phone 814 765-1551
FAX (814) 765-4306
Email: bfannin@cpcaa.net

Date: _____
Property Address: _____

Property Code: _____

ALL APPLICANTS WILL BE SUBJECT TO AN INVESTIGATION OF THEIR CREDIT AND RENTAL HISTORIES.

Name _____ Soc. Sec # _____ - _____ - _____ Date of Birth ____/____/____
Driver's Lic. # _____ Issuing State: _____ *(This Section must be completed.)*
Co-Applicant _____ Soc. Sec # _____ - _____ - _____ Date of Birth ____/____/____
Driver's Lic. # _____ Issuing State: _____ *(This Section must be completed.)*

Current Address _____ Current Landlord _____
City/State/Zip _____ Landlord's Phone _____
Current Phone _____ Monthly Rent Paid \$ _____
How long at this Address? _____ Reason for Moving? _____
Previous Address _____ Previous Landlord _____
City/State/Zip _____ Landlord's Phone _____
Current Phone _____ Monthly Rent Paid \$ _____
How long at this Address? _____ Reason for Moving? _____
Have you Ever been Evicted? [] Yes [] No Explain _____
Have you ever been asked to leave [] Yes [] No Explain _____

Current Employer _____ Current Position _____
Employment Address _____ Employment Phone _____
City/State/Zip _____ Supervisor's Name _____
Gross Income Per Month \$ _____ Date Hired? _____
Co-Applicant Employer _____ Position _____
Employment Address _____ Employment Phone _____
City/State/Zip _____ Supervisor's Name _____
Gross Income Per Month \$ _____ Date Hired? _____
Other Income (Assistance, Soc. Sec., Alimony, Etc.) _____ Monthly Amount \$ _____
Savings Acct at _____ Checking Acct at _____
Credit Acct (s) _____ Credit Acct (s) _____
Have you ever filed for Bankruptcy or become delinquent on any account? Explain _____

How many people will occupy this rental? _____ Number of Adults? _____ Children? _____
Names & Relationships of all occupants _____
Does Anyone smoke? _____ Do you have any Pets? _____ Type? _____
Car Make (s) _____ Year (s) _____ Lic. Plate # (s) _____
In Case of Emergency, Contact _____
Address _____ Phone _____
City/State/Zip _____ Relationship _____

I certify that all information given herein is true and complete. I authorize the investigation of all statements Contained In the application as well as authorize the investigation of my credit, rental & criminal histories. I understand that any false, misleading or negative information may result in the rejection of my application and/or the termination of my lease.

Applicant's Signature _____

Co-Applicant Signature _____

- Office Use Only -

Date App Rcvd _____
Verified [] Rental [] Employ [] Credit
S/D Rcvd _____ Rent Rcvd _____
Balance Due _____
Move-in Date _____
[] Approved Comments _____
[] Rejected _____
App Processed By _____

Central PA Development Corporation

PO Box 792

Clearfield PA 16830

[814] 765-1551 or 800-822-2610

NOTICE TO RENTAL APPLICANTS

The rental applicants hereby authorize the landlord to investigate their suitability as potential tenants.

Such investigation may include the questioning of current/former landlords, employers, neighbors, or other individuals able to assess the applicants' tenant-worthiness.

The landlord is hereby given the right to examine the applicants' rental histories [including any current/prior eviction proceedings], credit records, criminal histories, any other information deemed necessary by the landlord.

The applicants' understand that any negative information found may result in the rejection of their rental application by the landlord.

Date

Signed

Signed

