

TARGET INVESTMENT PROPERTY MANAGEMENT
 263 West Market Street
 York, PA 17401
 ph. (717) 845-4454

-20.00 Cash
 -Most Recent
 paystub or
 income
 -Photo ID

APPLICANT _____ DATE OF BIRTH _____ SS# _____
 CO-APPLICANT _____ DATE OF BIRTH _____ SS# _____
 Other Proposed Occupants _____ AGE _____ Relationship to Applicant _____

 Home Phone _____ Applying for _____

EMPLOYMENT

Applicant's Employer _____ Employer's Address _____
 Employer's phone _____ Shift _____ Income (weekly take home pay) _____ Date Hired _____
 Co-Applicant's Employer _____ Employer's Address _____
 Employer's phone _____ Shift _____ Income (weekly take home pay) _____ Date Hired _____

OTHER INCOME: DPA/SSI \$ _____ /month Child Support \$ _____ /month Food Stamps \$ _____

RESIDENCE (Needed for last 2 years minimum) Owner/Manager's Name & Telephone From To

Present Address	City	State	Zip	Owner/Manager's Name & Telephone	From	To
_____	_____	_____	_____	_____ / _____	_____	_____
Previous Address	City	State	Zip	_____ / _____	_____	_____
Prior Address	City	State	Zip	_____ / _____	_____	_____

REFERENCES * ADDRESS TELEPHONE NUMBER

REFERENCES	ADDRESS	TELEPHONE NUMBER
_____	_____	_____
_____	_____	_____

Nearest Relative _____

PERSONAL: Do you have any pets? _____ What Kind? _____
 Will anyone other than the above persons reside with you? _____ Why are you leaving your present residence? _____
 Have you ever been evicted? _____ Have you ever filed for bankruptcy? _____
 Have you ever been convicted of possession or use of drugs? _____ Smoker or Non Smoker? _____
 Own your car? _____ Year _____ Make _____ Model _____ Payment \$ _____
 Do you have any objection to a years lease? _____ When do you want possession? _____
 Do you have the security deposit and first month's rent? _____

The undersigned represents that the above statements are true and complete and authorizes verification of the information and references given. Any false or misleading information provided tby Applicant shall be grounds for forfeiture of deposit and an denial of the rental. Applicant acknowledges that a credit report will be performed and if unsatisfactory, a processing charge of ten dollars (\$10.00) will be subtracted from any deposit made and balance will be returned to applicant. If Applicant fails to accept apartment after approved, deposit will be forfeited.

SIGNATURE OF APPLICANT _____ DATE _____ SIGNATURE OF CO-APPLICANT _____ DATE _____