## APPLICATION FOR RESIDENCY

## THE VERNON HOUSE APARTMENTS

6445 Greene Street, Philadelphia, PA 19119

Please answer all questions fully and completely as possible. Each working adult must complete a separate application. Please print or type clearly.

Date: Name of	Applicant:			
Date of Birth:	Social Security	No.:		
Present Street Address:	**************************************			
City:	State:	Zip Code:		
Home Phone No.:	Work Phone	No.:	Ext.:	
Driver's License No.:	Dc	you own a car ?:Yes	No	
If yes, Make & Year of car:		Vehicle Registration:_		
Marital Status:Single;	Married;Divor	ced;Separated;	_Other	
List All Others Who Would Occupy the Apartment:				
Full Name		Age Sex Relatio	nship	
		·	· · · · · · · · · · · · · · · · · · ·	
Maiden Name of Applicant, or	Applicant's Spouse,	if Married, or Previous	ly Married:	
	10-11-11-11-11-11-11-11-11-11-11-11-11-1			
How, or by Whom, Were you Re	•			
Apartment Size Desired: Two Bedroom; Three Bedroom When Needed?				
RESIDENTIAL INFORMATION	_			
How Long Have You Lived at 3		• •		
Do You:Own;Rent;				
Name of Landlord or Mortgage Company:				
Phone No.: Reason for Vacating:				
Previous Address:				
Did You: Own; Rent; Live with Parents; Other Mo. Rent/Mortgage:\$				
How Long Did You Live at your Previous Address ?: Years				
Name of Previous Landlord or Mortgage Company:				
Address:	**************************************	Phone No.:	·	
Reason for Vacating:			·	
Have You Ever Been Evicted to		<del></del>		
If Yes, Reason for Eviction	P		<del>*************************************</del>	
EMPLOYMENT INFORMATION				
Name of Present Employer:				
Street Address:				
Position:	Gross	Weekly Salary: \$	<del></del>	
Length of Time with Present				
Name of Previous Employer:				
Street Address:				
		Weekly Salary: \$		
Length of Time with Previous		Name of Supervisor:		
Why Did You Leave??:				
Other Income: \$	per month; Source(s):		-	
CREDIT AND BANK REFERENCES	gradient state of the state of			
Checking Account - Name of 1	Bank:	Account No.	.:	
Savings Account - Name of Ba				
Other Assests - Describe:	,	·		

CREDIT AND BANK REFERENCES	
Credit Card - Name of Company:	Account No
Credit Card - Name of Company:	
Credit Card - Name of Company:	
Loan - Name of Company: Purp	
Balance Due: \$ Monthly Payment: \$	
Loan - Name of Company: Purp	ose:
Balance Due: \$ Monthly Payment: \$	Account No.
Other Credit References:	Account No.
Have You Ever Filed for Bankruptcy? Yes No	
If Yes, Give Circumstances:	
PERSONAL REFERENCES (OTHER THAN RELATIVES)	
Name: Phone No.	
Street Address: City:	State: Zip:
Name: Phone No.	
Street Address: City:	State: Zip:
Name: Phone No.	
Street Address: City:	State: Zip:
Person to Notify in Case of Emergency:	
Relationship: Phone No.	_
Street Address: City:	State: Zip:
I Hereby Affirm that the answers to the foregoing questions the best of my knowledge, and that I have not knowingly with stance which would, if disclosed, affect my application unfarmit my application fee, in the amount of \$25.00 and authors to conduct all necessary credit investigations (landlord, er and personal references) in consideration towards rental hor all fair credit disclosure requirements. I understand that non-refundable, regardless of whether or not my application interest in occupancy at Vernon House discontinues. I furth (our) credit application is approved by Vernon House, Inc., meeting of the Screening Committee of the Vernon Tenants' Assidetermination of my (our) application. I acknowledge that read a final copy of the Vernon House Apartments Procedures	neld any fact or circum- vorably. I herewith sub- ize Vernon House, Inc. mployment, ban, credit using in accordance with the application is on is approved, or if my her understand that if my that I must attend a sociation for a final I have received and
Applicant	pplicant

\* Payable to Winder Real Estate. Please mail check and completed application to:

Winder Real Estate, Inc. 7208 Germantown Avenue Phila., PA 19119

Date:\_

Credit Fee Paid: \$\_