

Barclay Square Apartments
1600 Garrett Rd
Upper Darby, PA 19082
(610) 626-2000
(610) 626-2064 fax
info@barclaysq.com

FOR OFFICE USE:	
Leasing Agent: _____	
Approved: _____	Date: _____
Denied: _____	Date: _____
Reason: _____	

RENTAL APPLICATION

This is a rental application only and does not constitute acceptance of the applicant or tenant, nor a rental agreement or tenancy relationship between parties. An application is to be completed by each prospective tenant 18 years or older. Inaccurate or falsified information will be grounds for denial, or subsequent eviction from the rental unit.

NON-REFUNDABLE APPLICATION FEE:

\$55.00 Per Person Application Fee:

The non-refundable application fee is not a deposit and will not apply towards rent should the applicant be accepted as a tenant. The application fee is to cover the costs of qualifying the applicant as a prospective tenant through credit and criminal background reports. The name of the screening service utilized CoreLogic Safe Rent Inc., National Tenant Network or any other residential screening service provider. You are entitled by law to dispute the accuracy of any information provided in the reports generated.

HOLD FEE:

After approval, \$250.00 deposit shall be submitted to hold the particular rental unit. If the application is approved and the prospective tenant chooses to enter into a Lease Agreement the deposit will be applied to first month's rent. Upon application approval, the prospective tenant has three (3) days within which to decide whether or not to enter into a Lease Agreement. If the prospective tenant decides not to enter into a Lease Agreement within the 3 day period, the deposit will be refunded. If the Leasing Office has not been notified by prospective tenant within 3 days of application approval of their intention to accept or decline the rental unit, the deposit is forfeited and becomes non-refundable.

Initials _____

Screening Guidelines:

Complete Application:

- Each prospective tenant 18 years of age must submit a complete application and \$55.00
- non- refundable application fee.
- Incomplete applications will not be reviewed
- We will accept the first qualified applicant(s)

Identification:

- Applicants must submit valid identification, must include photograph.
- Non-US Citizens Current Photo ID is required. Visa/Passport with I-94 or Permanent Resident Card.
- Applicant must have valid SS#, and or valid Passport.

Prior Rental History:

- Rental History of 2 years (if applicable) must be verifiable for unbiased/unrelated sources
- Applicant must provide us with information necessary to contact past landlords. We reserve the right to deny any application if, after making good faith effort, we are unable to verify prior rental history

Sufficient Income/Resources:

- Rent not to exceed (80 %) of weekly gross income
- Income/resources must be verifiable through pay stubs, (2/4 stubs) employer contract, current tax records, and/or bank statement.

Credit/Criminal/Public Records Checks:

- Negative reports may result in denial of application (Charges or Convictions)
- Any individual who is a current illegal substance abuser, or has been convicted of the illegal manufacture or distribution of a controlled substance, or of a felony may be denied.

Screening Process:

- We determine, based on the application, whether the applicant meets our screening guidelines
- We verify income and resources
- We check with current and previous landlords
- We obtain a credit report, criminal records report and public records report

You may submit a rental application as follows:

- Email: info@barclaysq.com we will hold till application fee is received.
- For hand delivery, please call to set-up an appointment

DATE _____ UNIT # _____ REQUESTED MOVE-IN DATE _____
LEASE TERM _____ RENTAL AMOUNT \$ _____
APPLICATION FEE \$ _____ PAID ON _____ RECEIPT# _____
HOLD FEE \$ _____ PAID ON _____ RECEIPT# _____

APPLICANT NAME (last) _____ (first) _____ (middle) _____

DATE OF BIRTH _____ SOCIAL SECURITY # _____

Email _____ CELL# _____
DRIVER'S LICENSE# _____ STATE _____ LICENSE PLATE# _____
AUTO MAKE _____ MODEL _____ COLOR _____

EMPLOYED BY _____ TELEPHONE# _____

EMPLOYER ADDRESS _____ SUPERVISOR _____

HOW LONG – years _____ months _____ POSITION _____

MONTHLY GROSS PAY\$ _____ OTHER INCOME (describe)\$ _____

PRESENT ADDRESS _____ CITY _____ STATE _____ ZIP _____

HOW LONG – years _____ months _____ MONTHLY RENT _____

LANDLORD _____ TELEPHONE# _____

PREVIOUS ADDRESS _____ CITY _____ STATE _____ ZIP _____

HOW LONG – years _____ months _____ MONTHLY RENT _____

LANDLORD _____ TELEPHONE# _____

PERSONAL REFERENCES (Local if possible)

Name _____ Telephone # _____

Address _____ City/State/Zip _____

PERSON TO BE NOTIFIED IN CASE OF EMERGENCY

Telephone # _____

Name _____

Address _____ City/State/Zip _____

Relationship _____

NAMES OF ALL PERSONS TO OCCUPY THE DWELLING

(Under the age of 18/Occupancy is limited to individuals listed)

1. Name _____ DOB _____

2. Name _____ DOB _____

3. Name _____ DOB _____

Why are you leaving your current residence? _____

How did you find out about our rental? Internet drive-by word of mouth other _____

Have you given legal notice where you currently live? YES NO

Do you intend to have 1 cat as a pet at this residence? YES NO if yes, Refer to Pet Addendum for Fees and Guidelines. (\$250.00 Non-Refundable Fee required and \$15.00 added to rent)

Have you been evicted in the last 5 years? YES NO

Name of Landlord and circumstances _____

Have you ever filed a petition in bankruptcy? YES NO

Have you ever been charged or convicted of a felony or misdemeanor? YES NO

If so, why? _____

Renters Insurance is Mandatory, (We must be named as additional insured on the policy)

AUTHORITY FOR RELEASE OF INFORMATION

Applicants authorize to obtain any information deemed necessary to evaluate this application. This information may include, but is not limited to, credit reports, criminal history, judgments of record, rental history, verification of employment and salary, employment history, vehicle records, and licensing records. Applicants acknowledge that all information in the application is true and correct. Applicants acknowledge that if they present false or incomplete information we may reject this application. Applicants understand that giving false or incomplete information may result in forfeiture of any payments made in connection with this Rental Application. Applicants understand that applicants acquire no rights in a rental unit until a Lease Agreement is fully executed by all parties.

I HAVE READ AND AGREE TO THE PROVISIONS AS STATED

Applicant Signature

Date

BARCLAY SQUARE APARTMENTS

1600 Garrett Road - Upper Darby, PA 19082 - Phone 610-626-2000 - FAX 610-626-2064

ADDENDUM "A" LANDLORD VERIFICATION

Landlord Name: _____

Landlord Address: _____

Landlord Phone: _____

RE: Applicant's Name:

To whom it may concern,

The above Applicant has made application with our company for apartment rental and has given your name as his/her previous Landlord. We would appreciate your furnishing the information requested below and any other additional data which will help establish a reference. This information will be for our confidential use only and will be a courtesy to the above, as well as to our company. Please note, the Applicant has signed the below release authorization.

Thank you in advance for your anticipated cooperation.

Sincerely,
Barclay Square Apartments Management

I hereby authorize the release of the requested information below and any additional information related to my residency for the above described purpose.

CLEARLY PRINT NAME

SIGNATURE

DATE

(APPLICANT DO NOT WRITE BELOW THIS LINE)

PREVIOUS LANDLORD VERIFICATION/REFERENCE:

Please complete and fax (610) 626-2064 to Barclay Square Apartments.

Residency Dates: _____ to _____ Monthly Rent: \$ _____ # of Late Payments: _____

Completed Lease Term: Y / N Proper Notice Given: Y / N Delinquency/Amount: Y / N \$ _____

Comments: _____

Manager/Landlord Signature: _____ Date: _____



BARCLAY SQUARE APARTMENTS

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ADDENDUM "B" EMPLOYER VERIFICATION

I hereby authorize the release of the requested information below and any additional information related to my employment for the purpose of verifying my income and meeting residential rental criteria.

CLEARLY PRINT NAME

SIGNATURE

DATE

Name of Employer: _____

Employer Contact Number: _____

HR Admin and/or Supervisor: _____

Applicant Social Security #: _____

(APPLICANT DO NOT WRITE BELOW THIS LINE)

EMPLOYER VERIFICATION/REFERENCE

Please complete and fax to Barclay Square Apartments, FAX 610-626-2064

Position Held: _____ **Start Date:** _____

Weekly Gross Income: \$ _____

Comments: _____

Signature: _____ **Position:** _____ **Date:** _____

