

COLLEGE HILL APTS.

You have just completed the first step in obtaining an apartment at College Hill Apartments by obtaining an application and a parent guarantee form. The following are some pointers that will assist you in completing the application correctly, providing for the most efficient processing, and approval process. We are happy you've chosen College Hill Apartments for your home away from home.

- Application:**
Please make sure all the questions are answered, if it does not apply, simply write N/A. A valid social security number must be provided, if a social security number is not provided or unavailable for any reason, a double deposit will be required.

- Advance Payment Addendum to Rental Application:**
This form must be signed, dated, and returned with your completed application.

- Parent Guarantee Form:**
Your parent or legal guardian MUST fill out this form completely. The questions on this form pertain to them and should be completed with their information, including income and mortgage amount, for your application to be processed. A valid social security number must be provided, if a social security number is not provided or unavailable for any reason, a double deposit will be required.
Make sure your name is on the form in the space provided near the center of the page. Your parent or legal guardian may email, fax or mail the completed form to SRM.

- Fees:**
The following fees must be paid with the submitted application:
 - 1) **Application Fee:**
\$40.00 - Per person, non-refundable

 - 2) **Security Deposit:**
\$950.00 - Per person, deposit for apartment

Please Note: These fees may be paid with a check or money order payable to Charlotte Street Associates or upon receipt of a completed application, you will be sent a link to make an online payment. If you choose to make an online payment, payment must be received within 24 hours of receiving the link or the application will be considered void, and no apartment will be held.

- After the application has been completed, it must be returned to Susquehanna Realty Management LLC. We will not begin processing applications or hold an apartment until we receive ALL forms.

Leases will be sent electronically unless otherwise requested.

If you or your parent(s) or legal guardians have questions, our office may be contacted by any of the following avenues:

Phone: 717-393-8400

Fax: 717-393-8700

E-mail: Info@SusqRealty.com

Web: www.SusqRealty.com

Susquehanna Realty Management LLC
744 Columbia Avenue
Lancaster, PA 17603

**CONSUMER NOTICE FOR TENANTS
THIS IS NOT A CONTRACT**

(Licensee) Susquehanna Realty Management LLC hereby states that with respect to this property (describe property) College Hill Apartments. I am acting in the following capacity: (check one)

- (i) Owner/Landlord of the Property;
- (ii) A direct employee of the Owner/Landlord; OR
- (iii) An agent of the Owner/Landlord pursuant to a property management or exclusive leasing agreement.

I acknowledge that I have received this Notice:

Date: _____

Print (Consumer)

Signed (Consumer)

Address (Optional)

Phone Number (Optional)

I certify that I have provided this Notice: _____ (Licensee) _____ (Date)

RENTAL APPLICATION

Provide at least two years of history in Sections 1 & 2. Fill out all sections completely.
Attach additional sheets if more space is needed. Please type or print all information clearly.

PROPERTY INFORMATION	
Address: _____	
Utilities Paid By Landlord: <u>Water, Sewer, Trash, F&M Ethernet</u>	
Utilities Paid By Tenant: <u>Electric, Gas, Cable, Telephone</u>	
Move In Date: <u>June 2024</u> Term: <u>12 months</u> Monthly Rent: \$ _____ Application Fee: <u>\$40.00</u>	
Deposits: <u>\$950.00</u> Other: <u>N/A</u> \$ _____	
<input checked="" type="checkbox"/> See Advance Payment Addendum for additional information	

APPLICANT INFORMATION

Full Name _____

Is Applicant at least 18 years old? Yes No Status for the 2024/2025 Term: JR SR Other

Social Security Number _____ Date of Birth _____

Home Phone _____ Cell Phone _____

Email Address _____

Home Address _____

In case of emergency, contact _____

Relationship _____ Phone(s) _____

VEHICLE INFORMATION

Make/Model	Year	Color	License Number/State



ROOMMATES (Please list the roommates you'd like to reside with)

SPECIAL PROVISIONS

AUTHORIZATION

Applicants authorize Landlord or Broker to obtain any information deemed necessary to evaluate this Application. This information may include, but is not limited to, credit reports, criminal history, judgments or record, rental history, verification of employment and salary, employment history, vehicle records, and licensing reports. Broker may report to Landlord any information obtained by Broker for evaluation of this Application. Applicants acknowledge that all information in the Application is true and correct. Applicants acknowledge that if they present false or incomplete information Landlord may reject this Application. Applicants understand that giving false or incomplete information may result in forfeiture of any payment made in connection with this Rental Application.

I HAVE READ AND AGREE TO THE PROVISIONS AS STATED.

APPLICANT _____ **DATE** _____

LANDLORD/BROKER (Company Name) Susquehanna Realty Management LLC
OFFICE ADDRESS 744 Columbia Avenue, Lancaster, PA 17603
PHONE(S) 717-393-8400 **FAX** 717-393-8700 **EMAIL** Info@SusqRealty.com

AGENT/RECEIVED BY _____ **DATE** _____



NOTICE AND INFORMATION

CIVIL RIGHTS ACT NOTICE

Federal and state laws make it illegal for a landlord, broker, or anyone to use RACE, COLOR, RELIGION or RELIGIOUS CREED, SEX, DISABILITY (physical or mental), FAMILIAL STATUS (children under 18 years of age), AGE (40 and older), NATIONAL ORIGIN, USE OR HANDLING/TRAINING OF SUPPORT OR GUIDE ANIMALS, or the FACT OF RELATIONSHIP OR ASSOCIATION TO AN INDIVIDUAL KNOWN TO HAVE A DISABILITY as reasons for refusing to sell, show, or rent properties, loan money, or set deposit amounts, or as reasons for any decisions relating to the sale or lease of property. It is also an unlawful discriminatory practice to evict or attempt to evict an occupant of a housing accommodation before the end of the term of lease because of the pregnancy or birth of a child.

FAIR CREDIT REPORTING ACT NOTICE 15 U.S.C. § 1681 et. Seq.

If the Landlord or Broker denies your application based in whole or in part on any information contained in the consumer report authorized by paragraph 12 of this Application, the Landlord or Broker must provide you with oral, written or electronic notice of the denial, and must provide to you: (1) the name, address, and telephone number of the consumer reporting agency (including a toll-free number established by the agency if the agency complies and maintains files on consumers on a nationwide basis) that furnished the report, (2) a statement that the consumer reporting agency did not make the decision to deny the application and is unable to provide you with the specific reasons why your application was denied, (3) information about how to obtain a free copy of your consumer report from the consumer reporting agency, and (4) information about how to dispute your application because of information from a person other than a credit reporting agency (for example, an employer or prior landlord), the Landlord or Broker must provide you with notice about your right to make a written request to discover the nature of that information.



ADVANCE PAYMENT ADDENDUM TO RENTAL APPLICATION

APA

This form recommended and approved for, but not restricted to use by, the members of the Pennsylvania Association of REALTORS® (PAR).

1 **PROPERTY** College Hill Apartments, ,

2 **APPLICANT** _____

3 **LANDLORD/BROKER** Susquehanna Realty Management LLC

4 **DATE OF APPLICATION** _____

6 1. **Application Fee.** The Application Fee of \$ _____ identified on the Rental Application is **NON-REFUNDABLE**
7 and will not be applied towards rent or other financial obligations should Applicant be approved. Applicant agrees that this
8 sum is paid in consideration of Landlord/Broker's review and/or verification of the information stated in the application.

10 2. **Advance Payments of Security Deposit and Rent.** In addition to the Application Fee, Applicant will pay Security Deposit
11 and/or Rent as stated below. These amounts will be paid at the time the Rental Application is given to Landlord/Broker, unless
12 a different date is stated here. Security Deposit Due Date: _____ Rent Due Date: _____

14 (A) **Security Deposit: \$ 950.00** . The Security Deposit shall be held by (check one):
15 **Broker.** Applicant agrees that Broker may wait to deposit any uncashed check that is received as a Security Deposit
16 until Applicant's Rental Application is approved/accepted. Upon approval of the Rental Application, Broker will deposit
17 the Security Deposit in an escrow account as required by the Rules and Regulations of the State Real Estate Commission
18 pending the termination of the Lease, the sale of the property to a new Landlord, or the termination of Broker's services.
19 If the property is sold, or the Broker's services are terminated, Applicant will be notified of the person to whom the
20 Security Deposit has been transferred.

21 **or**
22 **Landlord.** Landlord will hold Applicant's Security Deposit in compliance with the Pennsylvania Landlord and
23 Tenant Act as more completely described in the Lease Agreement.

25 (B) **Rent: \$ _____** . Rent, even if paid to Broker, may be transferred to Landlord. While held by Broker,
26 the rent will be maintained in a rental management account as required by the Rules and Regulations of the State Real
27 Estate Commission.

29 3. **Refund of Advance Payments.** Applicant may withdraw the Application at any time prior to approval or within _____ days
30 from notice of approval. If Applicant withdraws within the stated time period, or the Property is leased or sold prior to
31 Applicant signing a Lease Agreement, the full amount of the Advance Payments of Security Deposit and/or Rent will be
32 returned to Applicant. If Applicant's payment of these amounts was by check, the refund may occur after Applicant's check
33 has cleared.

35 4. **Lease.** Applicant will, within 5 days from notice of approval, sign a Lease Agreement. Applicant has received
36 a copy of the Lease Agreement and has had the opportunity to review it.

38 5. **Liquidated Damage - Loss of Advance Payments.** If Applicant furnishes false or misleading information on the Rental
39 Application, does not sign a Lease Agreement within the time period stated in paragraph 4 and/or fails to pay the full amount
40 of the Advance Payments as stated above, Applicant will lose any right to lease and may forfeit any Advance Payments made
41 under the terms of this Addendum. Landlord and Broker are released from all obligations to Applicant and may elect to retain
42 any or all Advance Payments as liquidated damages or as monies to be applied against Landlord's/Broker's actual damages.

44 **I have read and agree to the provisions as stated.**

46 **APPLICANT** _____ **DATE** _____

48 **APPLICANT/CO-SIGNER** _____ **DATE** _____

50 **APPLICANT/CO-SIGNER** _____ **DATE** _____

52 **APPLICANT/CO-SIGNER** _____ **DATE** _____

54 **LANDLORD/BROKER (Company Name)** Susquehanna Realty Management LLC

55 **ACCEPTED BY** _____ **DATE** _____



PARENT GUARANTEE FORM

ALL INFORMATION CONTAINED HEREIN WILL REMAIN CONFIDENTIAL

Please fill out all information requested.

Full Name: _____ Birth date: _____

Social Security #: _____ Driver's Lic. # _____

Phone #: _____ Email: _____

Present Home Address _____

How Long ___ Own ___ Rent ___ Rental/Mortgage Amt. _____

Landlord/Mortgage Co. _____ Phone # _____

Present Employer _____ Phone # _____

Address of Employer _____

Position _____ Supervisor _____

Approx. Income _____ Add'l Income _____

ADDENDUM TO LEASE AGREEMENT BETWEEN CHARLOTTE STREET ASSOCIATES 'OWNER' AND

Applicant Name 'Resident'

Intending to be legally bound and in consideration of the lease, beginning June 1, 2024, with the parties listed above, we hereby become surety to Owner for the performance of the lease by Resident and guarantees payment of all sums becoming owing to Owner by Resident. This agreement shall remain in effect throughout the term of the lease, and notwithstanding any change in the terms of the lease or in the amount of rent without notice to the undersigned. The liability of the undersigned is absolute, continuing and unconditional and Owner shall not be required to proceed against Resident or invoke any other remedy before proceeding against the undersigned. Notice of acceptance of the agreement and notice of any default are waived.

AUTHORIZATION Co-Signers authorize Owner or Broker 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. Broker may report to Owner any information obtained by Broker for evaluation of the Application. Applicants acknowledge that all information in the Application is true and correct. Co-Signers acknowledge that if they present false or incomplete information the Owner may reject this Application. Co-Signers understand that giving false or incomplete information may result in forfeiture of any payment made in connection with this Rental Application.

Co-Signer

Date

Relationship to Tenant

Susquehanna Realty Management LLC Agent for Owner

Date