

AMBERSON PLAZA ASSOCIATES

5030 CENTRE AVENUE PITTSBURGH, PA 15213 412-681-9870 FAX 412-681-3419

RENTAL APPLICATION

NO CASH ACCEPTED

Date _____ Apartment Requested _____

Possession Date _____ Rental Fee _____

Birthday _____

Name _____ Current Address _____

Email Address _____

Length of Residence _____ Home Phone # _____

Employment _____ Length of Employment _____

Position _____ Work Phone # _____

Monthly Salary _____ Other Income _____

Social Security # _____ Age _____

Students:

Name of School or University _____ Expected Graduation date: _____

List all residences during the last five years other than current address:

List all employers during the last five years other than current employer:

Emergency Contact:

Name _____ Phone # _____

Address: _____

List three personal references (Include phone number and address):

Full Name(s) of Roommate/Children	Date of Birth

Along with this application, you will need a photo id and the following:

Security Deposit \$ _____
First Month's Rent \$ _____
Electric Deposit \$75/\$100 \$ _____
Application Fee \$ _____
Total Due: \$ _____

***In the event that this application is not accepted, this deposit shall be promptly returned in full (less the application fee). Should I withdraw this application for any reason, the security deposit and application fee shall be retained by Amberson Plaza as liquidated damages.**

Signature _____ Date _____