# **LINCOLN TOWER APARTMENTS**



#### APPLICATION FEE \$40.00 PER APPLICANT NO CASH Check or Money Order Accepted Payable to <u>Lincoln, LP</u>

### **ITEMS REQUIRED FOR APPLICATION PROCESS**

### IDENTIFICATION FOR ALL HOUSEHOLD MEMBERS REQUIRED

• Valid Picture ID/Drivers License

#### INCOME

- Last 3 pay stubs for all applicants 18 years of age or older
- Alimony/Child Support orders (if applicable)

## Mail completed applications with application fees to:

# Lincoln, LP 100 North 5<sup>th</sup> Street Reading, PA 19601

Incomplete applications will not be processed

LINCOLN TOWER APARTMEI	NTS		RENTAL /	APPLICATION		
100 North Fifth Street		For Office Use Only				
Reading, PA 19601		Date:				
Phone: 610-375-3413		Property				
Fax: 610-375-3425		Apt No		Rent\$		
Please complete all requested informat	ion. Thank you for your interest in our	apartments.				
Date of Application		Desired Date of O	ccupancy			
Type and Size of Apartment Wanted (# o	of Bedrooms, etc)					
How Did you Hear About our Property:						
	PERSONAL INFORMAT	ION				
Applicants Full Name			Date of Birth	<u>1:</u>		
Social Security #	Home Ph#:			Email:		
Driver's License #/State	Work Phone	#		Cell Phone #		
Co-Applicant's Full Name:		Date of Birth:				
Social Security #	Home Ph#:		Email:			
Driver's License #/State	ver's License #/State Work Phone#			Cell Phone #		
Full Names of All Other Residents:	Relationship to You			Date of Birth		
	RESIDENCE HISTORY					
Present Address			Dates From	/то:		
Present Landlord or Mortgage Co,			Phone#:			
Monthly Payment \$	Reason for M	Aoving:				
	EMPLOYMENT INFO	RMATION				
Present Employer:			Dates From	/То:		
Employer Address:			Phone #:			
Position:	Supervisor:		Gross Mont	hly Salary \$:		
Previous Employer:			Dates From	/то:		
Employer Address:			Phone #:			
Position:	Supervisor:		Gross Mont	hly Salary \$:		
Co-Applicant's Employer:			Dates From	/то:		
Employer Address:			Phone #:			
Position:	Supervisor:		Gross Mont	hly Salary \$:		
	BANKING AND CREDIT	REFERENCES				
Bank Name & Branch			Telephone:			
Checking Account:	yes/no (please circle one)		yes/no (please circle one)			
Loan/Mortgage:		Monthly Payment	:			
Other Reference:						

#### LTA Full rental application

Lotal Number of Vehicles cincluding com	any vehicles		ER INFORMATIO	N						
I otal Number of Vehicles <including company="" vehicles=""> Make/Model: Year/Color</including>				Tag #/State:						
						Tag #/State:				
Other Car, Motorcycle, Etc:			- 0 ,							
Total Gross Monthly Household Income: \$					_					
If there are any other sources of income you would I	ike us to consid	er, pleas	e list income, source ar	nd person (Banker, Emplo	- yer, etc) who w	e could				
contact for confirmation. You do NOT have to revea	l alimony, child	support	or spouse's income unl	less you want us to consid	der it in this appl	ication				
Amount \$	Per: Source:			Phone #:						
Amount \$	Per:		Source:		Phone #:					
Comments:										
		<u> </u>								
HAVE YOU or CO-APPLICANT EVER:			e Yes or No	Been sued for non			YES	NO		
Been Evicted or asked to move out?		YES	NO	Broken a Rental Ag	Lease?	YES	NO			
Been Sued for damage to rental property	?	YES	NO	Declared Bankrupt	cy?		YES	NO		
In case of Emergency Notify:					Relationship	):				
Address:			Phone:	Cell Phone:						
					-					
I hereby make application for an apartment and certify that				Applicants Signature:						
this information is coorect. I authorize you to										
references that I have listed. I also authorize you to obtain				Co-Applicant Signa	Co-Applicant Signature					
my consumer credit report from your credit re										
which will appear as "an inquiry" on my file. Along w	Date Signed:									
		FOR	OFFICE USE ONL	Y - DO NOT WRITE	BELOW					
Date Application Received:				Received By:						
Reference Verification	Remarks			Record of Payment Received						
Present Landlord				Date	Description		Amou	int		
Previous Landlord										
Employment										
Previous Employer:				This Application:						
Co-Applicant Employer:				Approved:		Not Approved:				
Bank:				Date:		By:				
Credit (1)				Assigned to Apt#		Rent: \$				
Credit (2)				Apartment Address:						
				Applicant Notified by:						
Other:				Anticipated Move	Anticipated Move-In Date:					

Lincoln, LP/Lincoln Tower Apartments

100 N. Fifth Street, Reading, PA 19601 Phone: 610/375-3413 Fax: 610/375-3425 To whom it may concern:

I, give permission to Lincoln Tower Apartments to verify with with you the information requested below:

Employment Verification:

Rental History Verification:

Applicants Signature:

Date: