



APPLICATION FOR RENTAL

www.go-sherman.com



York Office:
1210 E. Market St.
York, PA 17403
(717)699-2229
Fax: (717) 699-2219

Hanover Office:
209 Broadway
Hanover, PA 17331
(717)797-5998
Fax: (717) 698-3903

HEAD OF HOUSEHOLD NAME (please print): _____

HOW DID YOU HEAR ABOUT US? (please circle one):

Banner Newspaper Website Sign at Property Billboard Friend Relative Passed by office other:

Thank you for choosing Sherman. We look forward to giving you excellent service. Please review the following guidelines regarding the application process:

- **If accepted, applicants will have 48 hours (2 business days) from acceptance to provide one full month's rent (certified check or money order) and sign a completed lease. If applicant fails to do so, his or her application will be withdrawn. A separate certified check or money order for the security deposit is required prior to taking possession of any unit.**
- Each application must be accompanied by a \$50 non-refundable application fee, proof of income and proper ID. Applicant's \$50 check or money order (no cash) should be made payable to **Sherman Property Management, Inc.** If your check for your application fee bounces, your application will be automatically rejected even if it has been accepted previously. It is SPM's strict policy to refuse to take an application from someone if:

*full application fee is not included *proper ID is not provided *application is incomplete in anyway *proof of income is not included
- Applicants may mail the application by regular mail, however if the envelope does not contain a complete application, a \$50 check or money order, proof of income and a copy of a valid ID, the application will be returned to the sender and the applicant will not be put on the waiting list.
- Applicants must provide a valid state photo ID or Passport; other forms of identification may be required during the application process.
- **DOCUMENTATION PROVING CURRENT INCOME IS REQUIRED.** For employment income, a copy of most recent pay stub must be presented. We reserve the right to obtain third party documentation of unsubstantiated income or any other information deemed necessary using the attached release signed by the applicant.
- Sherman Property Management, Inc. does not represent you in any agency capacity. A business relationship will not be presumed.
- Sherman Property Management, Inc. limits the number of occupants of a unit to no more than twice the number of bedrooms. **NO PETS OR WATERBEDS ALLOWED UNLESS OTHERWISE NOTED.**
- **YOU MAY ONLY APPLY FOR ONE APARTMENT OR HOUSE AT A TIME.** If you wish to switch your application to a different unit, you must contact the office. If you switch your application to a different unit, the date and time on your application will be switched to the date and time you contact the office to request the change.
- Applicants who receive Section 8 assistance for their current house or apartment will not be put on the waiting list until they provide us with an approved "Move Voucher" signed by their coordinator.



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**“CONSUMER NOTICE
THIS IS NOT A CONTRACT”**

Sherman Property Management hereby states that with respect to all properties, licensed Agents are acting in capacity of an agent of the owner / landlord pursuant to a Property Management Agreement.

I acknowledge that I have received this notice:

Applicant #1 Signature: _____ Date: _____

Applicant #1 Printed Name: _____

Applicant #2 Signature: _____ Date: _____

Applicant #2 Printed Name: _____

Each household member who is 18 or older should sign, print and date below.

I hereby authorize management or its agent to investigate my past history for the purpose of determining approval of this application for residency. This consent includes any history of residency, employment, income, credit, and any other references that management deems necessary.

Please note: This is an application and gives no lease or rental rights. Falsified statements on this form shall be considered sufficient cause for denying lease rights. By signing this form, you are certifying that all the information is true and complete and that you understand and agree to all rules and procedures listed in this form.

Applicant #1 Signature: _____ Date: _____

Applicant #1 Printed Name: _____

Applicant #2 Signature: _____ Date: _____

Applicant #2 Printed Name: _____

Management Signature: _____ Printed Name: _____ Date: _____



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**RENTAL APPLICATION
Equal Housing Opportunity**

The undersigned hereby makes an application to rent the following property:

Anticipated move date of _____

Applicant Information

Name:			
Date of birth:	SSN:	Phone:	
Current address:		EMAIL ADDRESS:	
City:	State:	ZIP Code:	
Own Rent (Please circle)	Monthly payment or rent:		How long?
Current Landlord:	Name:	Phone #	
Previous address:			
City:	State:	ZIP Code:	
Owned Rented (Please circle)	Monthly payment or rent:		How long?
Previous Landlord:	Name:	Phone #	

Employment Information

Current employer:			
Employer address:			How long?
Phone:	E-mail:	Fax:	
City:	State:	ZIP Code:	
Position:	Hourly Salary (Please circle)	Annual income:	

Emergency Contact

Name of a person not residing with you:			
Address:			
City:	State:	ZIP Code:	Phone:
Relationship:			

Co-applicant Information

Name:		
Date of birth:	SSN:	Phone:



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Current address:		EMAIL ADDRESS:	
City:	State:	ZIP Code:	
Own Rent (Please circle)	Monthly payment or rent:		How long?
Current Landlord:	Name:	Phone #:	
Previous address:			
City:	State:	ZIP Code:	
Owned Rented (Please circle)	Monthly payment or rent:		How long?
Previous Landlord:	Name:	Phone #:	
Emergency Contact			
Name of a person not residing with you:			
Address:			
City:	State:	ZIP Code:	Phone:
Relationship:			
Co-applicant Employment Information			
Current employer:			
Employer address:			How long?
Phone:	E-mail:	Fax:	
City:	State:	ZIP Code:	
Position:	Hourly Salary (Please circle)	Annual income:	
References			
Name:	Address:		Phone:
I authorize the verification of the information provided on this form as to my credit & employment, rental/mortgage history.			
Signature of applicant:			Date:
Signature of co-applicant:			Date:



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PLEASE ANSWER ALL OF THE FOLLOWING QUESTIONS:

Does your household have any pets: Yes _____ No _____

If yes, what type of pets?: _____ Breed?: _____ Weight?: _____

Please note: Pets are not allowed in most units. If a pet is permitted, there will be an additional security deposit and certain restrictions.

Have you ever been evicted from housing? _____

Have you ever refused to pay rent when due? _____

Do you owe money to any landlords?: _____

How many people in your household total (children & adults combined)? _____

Names of all occupants (including children): _____,
_____, _____,
_____, _____, _____

(note: Anyone 18 years or older will need to sign the lease)

How many bedrooms in the unit you are applying for? _____

Please note: Sherman Property Management, Inc. limits the number of occupants of a unit to no more than twice the number of bedrooms.

For Office Use Only:

<u>OTHER INCOME</u>	<u>MONTHLY AMOUNT</u>
AFDC	\$ _____
ALIMONY	\$ _____
CHILD SUPPORT	\$ _____
INTEREST INCOME	\$ _____
MILITARY ALLOTMENT	\$ _____
PENSION	\$ _____
SOCIAL SECURITY	\$ _____
SSI	\$ _____
UNEMPLOYMENT	\$ _____
VA BENEFITS	\$ _____
OTHER (EXPLAIN)	\$ _____