

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** _____

2 **APPLICANT** _____

3 **LANDLORD/BROKER** Grosse & Quade Management Co.

4 **DATE OF APPLICATION** _____

5

6 1. **Application Fee.** The Application Fee of \$ 40.00 per applicant 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.

9

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: at time application is submitted Rent Due Date: when keys are retrieved

13

14 (A) **Security Deposit:** \$ _____. 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

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

25

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

29

30 3. **Refund of Advance Payments.** Applicant may withdraw the Application at any time prior to approval or within five (5) days
31 from notice of approval. If Applicant withdraws within the stated time period, or the Property is leased or sold prior to
32 Applicant signing a Lease Agreement, the full amount of the Advance Payments of Security Deposit and/or Rent will be
33 returned to Applicant. If Applicant's payment of these amounts was by check, the refund may occur after Applicant's check
34 has cleared.

35

36 4. **Lease.** Applicant will, within ten (10) days from notice of approval, sign a Lease Agreement. Applicant to provide proof
37 of renters insurance. Grosse & Quade Management Co. must be listed as additional insured.

38

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

44

45 I have read and agree to the provisions as stated.

46

47 **APPLICANT** _____ **DATE** _____

48

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

50

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

52

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

54

55 **LANDLORD/BROKER (Company Name)** Grosse & Quade Management Co.

ACCEPTED BY _____ **DATE** _____

RENTAL APPLICATION FOR REPRESENTED LANDLORDS

RARL

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

1 The following box should be completed only when the real estate licensee represents the landlord, is a direct employee of the land-
2 lord or owns the property. This box should not be completed when licensee is subagent for the landlord, a tenant agent or is a trans-
3 action licensee. If it should not be completed the full Consumer Notice should be completed and the applicant should proceed to the
4 section below this box.

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

7 (Licensee) _____ hereby states that with respect to this property (describe property)
8 _____, I am acting in the following capacity: (check one)
9 (i) Owner/Landlord of the Property;
10 (ii) A direct employee of the Owner/Landlord; OR
11 (iii) An agent of the Owner/Landlord pursuant to a property management or exclusive leasing agreement.

12 I acknowledge that I have received this Notice:
13 Date: _____
14 _____ Print (Consumer) _____ Signed (Consumer)
15 I certify that I have provided this Notice: _____
16 _____ (Licensee) _____ (Date)

17 Broker/Licensee for Landlord

18 Broker (Company) Grosse & Quade Management Co. Licensee(s) (Name) _____
19 _____
20 Company Address 762 E. Main St., 2nd Floor Direct Phone(s) _____
21 Lansdale, Pa. 19448 Cell Phone(s) _____
22 Company Phone 215-855-8700 Fax _____
23 Company Fax 215-855-1327 Email _____

24 Broker/Licensee for Tenant

25 Broker (Company) _____ Licensee(s) (Name) _____
26 _____
27 Company Address _____ Direct Phone(s) _____
28 _____ Cell Phone(s) _____
29 Company Phone _____ Fax _____
30 Company Fax _____ Email _____

31 Property Information (to be completed by Broker for Landlord)

32 Address _____
33 Move-in Date _____ Term _____
34 Application Fee (non-refundable) \$ _____ Application Deposit \$ _____
35 Monthly Rent \$ _____ Security Deposit \$ _____
36 First Month's Rent \$ _____ Last Month's Rent \$ _____
37 Are pets permitted? (Yes) (No) May be subject to review. Pet Rent \$ _____
38 Non-refundable Pet Fee \$ _____ Other _____ \$ _____
39 _____
40 Is rental insurance required for tenants? (Yes) (No)
41 Rent and Security Deposit checks will be written separately.
42 How did you hear about the property? _____

43 Applicant's Initials _____

RARL Page 1 of 4

44 **1. APPLICANT INFORMATION**

45 Provide at least two years of history. Attach additional sheets if more space is needed.

46 The individual listed below is a(n): () Applicant () Co-signer

47 Full Name _____

48 Home Phone _____ Work Phone _____

49 Cell Phone _____ Email _____

50 Present Address & ZIP _____

51 From _____ To _____ Rent/Mortgage \$ _____ /mo. () Own () Rent () Other

52 Landlord/Mortgage Co. Name & Phone _____

53 Previous Address & ZIP _____

54 From _____ To _____ Rent/Mortgage \$ _____ /mo. () Own () Rent () Other

55 Landlord/Mortgage Co. Name & Phone _____

56 Is Applicant at least 18 years old? () Yes () No

57 Are you applying with anyone else? () Yes () No A separate application must be completed for each applicant/co-signer.

58 Name _____ () Applicant () Co-signer

59 Name _____ () Applicant () Co-signer

60 Name _____ () Applicant () Co-signer

61 Name _____ () Applicant () Co-signer

62 Will anyone else be occupying the property? () Yes () No

63 Include the full name of any other person not listed above who will be occupying the property.

64 Name _____ () 18 or older

65 Name _____ () 18 or older

66 Name _____ () 18 or older

67 Name _____ () 18 or older

68 Check here if additional information is attached

69 **2. EMPLOYMENT INFORMATION**

70 Provide at least two years of history. Attach additional sheets if more space is needed.

71 Employer _____

72 Employed From _____ To _____

73 City/State _____ Phone _____

74 Supervisor _____ Position _____

75 Gross Income: \$ _____ /mo. OR \$ _____ /hr., for _____ hrs. per week (on average)

76 Previous Employer _____

77 Employed From _____ To _____

78 City/State _____ Phone _____

79 Supervisor _____ Position _____

80 Gross Income: \$ _____ /mo. OR \$ _____ /hr., for _____ hrs. per week (on average)

81 Proof of income attached

82 Check here if additional information is attached

83 **3. OTHER INCOME USED FOR MONTHLY EXPENSES**

84 Alimony, child support, or separate maintenance income need not be revealed if Applicant does not wish to have it considered
85 as a basis for paying this obligation.

86 Source Amount Source Amount

87 _____

88 _____

89 Check here if additional information is attached

90 **4. BANK ACCOUNT INFORMATION**

91 Bank Name Account Type Balance

92 _____ \$ _____

93 _____ \$ _____

94 _____ \$ _____

95 Check here if additional information is attached

96 Applicant's Initials _____

Applicant name _____

97 **5. MONTHLY PAYMENTS**

98	Lender Name	Loan Type	Balance Due	Monthly Payment
99	_____	_____	\$ _____	\$ _____
100	_____	_____	\$ _____	\$ _____
101	_____	_____	\$ _____	\$ _____
102	_____	_____	\$ _____	\$ _____

103 Check here if additional information is attached

104 **6. VEHICLE**

105 Include any cars, trucks, vans, motorcycles, trailers, boats and recreational vehicles.

106	Make/Model	Year	Color	License Plate/State
107	_____	_____	_____	_____
108	_____	_____	_____	_____
109	_____	_____	_____	_____

110 Check here if additional information is attached

111 **7. PETS**

112 Does any Applicant or Occupant own any pets? (Yes) (No) If yes, provide detail below.

113	Pet 1	Pet 2	Pet 3
114	Type (Cat, dog, etc.) _____	_____	_____
115	Breed _____	_____	_____
116	Age _____	_____	_____
117	Weight _____	_____	_____
118	Gender _____	_____	_____

119 **8. OTHER INFORMATION**

120 (Yes) (No) Have you ever declared bankruptcy or suffered foreclosure?

121 If yes, list any payments: \$ _____

122 (Yes) (No) Have you ever defaulted on your mortgage?

123 (Yes) (No) Have you been evicted or sued for unpaid rent or damages to leased property?

124 (Yes) (No) Have you ever refused to pay rent for any reason?

125 (Yes) (No) Have you ever been convicted of or entered a plea of guilty or nolo contendere for a felony or misdemeanor?

126 (Yes) (No) Since January 1, 1998, Have you been obligated to pay support under any order(s) of record? If yes:

127 County _____ Domestic Relations File or Docket Number: _____

128 Amount _____ Are you delinquent? _____

129 If you answered "yes" to any of the above questions, please explain: _____

130 _____

131 _____

132 Check here if additional information is attached

133 **9. CONDITION OF PROPERTY**

134 The Property will be leased in the same condition as it is shown unless otherwise agreed to in writing.

135 **10. APPLICATION FEE**

136 The Application Fee is NON-REFUNDABLE and will not be applied towards rent or other financial obligations should
137 Applicant be approved, nor refunded if not approved. Applicant agrees that this sum is paid in consideration of
138 Landlord/Broker for Landlord's review and/or verification of the information stated in the application.

139 **11. OBLIGATION TO ENTER INTO LEASE AGREEMENT/ DAMAGES**

140 Upon submission of this Application, Landlord/Broker for Landlord reserves the right to remove property from the available
141 rent list. If this Application is denied by Landlord, the Application Deposit shall be refunded to Applicant. If this Application
142 is approved and Applicant fails to rent the Property, Landlord shall be entitled to retain the Application Deposit.

143 **12. CONVICTED SEX OFFENDERS (MEGAN'S LAW)**

144 The Pennsylvania General Assembly has passed legislation (often referred to as "Megan's Law," 42 Pa.C.S. § 9791 et seq.)
145 providing for community notification of the presence of certain convicted sex offenders. Potential tenants are encouraged
146 to contact the municipal police department or the Pennsylvania State Police for information relating to the presence of
147 sex offenders near a particular property, or to check the information on the Pennsylvania State Police web site at
148 www.pameganlaw.state.pa.us.

149 Applicant's Initials _____

Applicant name _____

150 **13. NOTICE TO PERSONS OFFERING TO SELL OR RENT HOUSING IN PENNSYLVANIA**
151 Federal and state laws make it illegal for Landlord, Broker, or anyone to use RACE, COLOR, RELIGION or RELIGIOUS
152 CREED, SEX, DISABILITY (physical or mental), FAMILIAL STATUS (children under 18 years of age), AGE (40 or older),
153 NATIONAL ORIGIN, USE OR HANDLING/TRAINING OF SUPPORT OR GUIDE ANIMALS, or the FACT OR RELA-
154 TIONSHIP OR ASSOCIATION TO AN INDIVIDUAL KNOWN TO HAVE A DISABILITY as reasons for refusing to sell,
155 show, or rent properties, loan money, or set deposit amounts, or as reasons for any decision relating to the sale of property.
156 The municipality in which the Property is located may have enacted an ordinance or other law that extends the protections for
157 access to housing to additional classes of individuals, such as gay, lesbian, bisexual and transgender individuals and couples.
158 Broker and Landlord are advised to check with your local municipality, representative from the Pennsylvania Human
159 Relations Commission, or your own attorney for further guidance.

160 **14. FAIR CREDIT REPORTING ACT**
161 If the Landlord or Broker denies your application based in whole or in part on any information contained in the consumer report author-
162 ized by paragraph 16 of this Application, the Landlord or Broker must provide you with oral, written or electronic notice of the denial,
163 and must provide to you: (1) the name, address, and telephone number of the consumer reporting agency (including a toll-free tele-
164 phone number established by the agency if the agency compiles and maintains files on consumers on a nationwide basis) that furnished
165 the report, (2) a statement that the consumer reporting agency did not make the decision to deny the application and is unable to pro-
166 vide you with the specific reasons why your application was denied, (3) a numerical credit score, the range of possible credit scores
167 under the model used, up to four of the key factors that led to the denial, and the date the credit score was created (4) information about
168 how to obtain a free copy of your consumer report from the consumer reporting agency, and (5) information about how to dispute the
169 accuracy or completeness of any information in a consumer report furnished by the agency. If the Landlord or Broker denies your appli-
170 cation because of information from a person other than a credit reporting agency (for example, an employer or prior landlord), the
171 Landlord or Broker must provide you with notice about your right to make a written request to discover the nature of that information.

172 **15. SPECIAL CLAUSES**
173 (A) The following are part of this Application if checked:
174 Advanced Payment Addendum (PAR Form APA)
175 _____
176 _____
177 (B) Additional Terms: _____
178 _____
179 _____

180 **16. AUTHORIZATION**
181 By initialing below, Applicant provides the described authorization.
182 _____ Applicant authorizes Landlord or Broker for Landlord to obtain any information deemed necessary to evaluate this
183 Application. This information may include, but is not limited to, credit reports, criminal history, judgments of record,
184 rental history, verification of employment and salary, employment history, vehicle records, and licensing records.
185 Broker for Landlord may report to Landlord any information obtained by Broker for Landlord for evaluation of the
186 Application. Applicant acknowledges that all information in the Application is true and correct. Applicant acknowl-
187 edges that if applicant presents false or incomplete information Landlord may reject this Application. Applicant
188 understands that giving false or incomplete information may result in forfeiture of any payments made in connection
189 with this Rental Application.

190 _____ Applicant authorizes the Broker for Owner to contact the Applicant directly.
191 _____ Applicant agrees that Broker(s), his/her agent(s) and/or employee(s) may provide Applicant's social security num-
192 ber, individual taxpayer identification number, driver's license information and date of birth to lenders, title agen-
193 cies, credit reporting companies, or others as necessary for obtaining reports or information from a credit reporting
194 agency, determining the existence of domestic liens, or for obtaining a criminal background report (for prospective
195 tenants only). Applicant understands that Brokers have no control over the use of any information after it is
196 disclosed to a third party and agrees to release and hold Brokers harmless from any and all liability for any
197 misuse or subsequent disclosure by any third party of the information or reports disclosed by Broker pur-
198 suant to the terms of this authorization.

For Tenant Identification Purposes Only

200 Social Security Number/ITIN _____ Date of Birth _____
201 Driver's License/Government ID Number _____ Driver's License State _____

202 **I HAVE READ AND AGREE TO THE PROVISIONS AS STATED.**

203 **APPLICANT SIGNATURE** _____ **DATE** _____

204 **APPLICANT NAME** _____ **DATE** _____

**GROSSE
& QUADE** 
MANAGEMENT CO.

Date _____

RE: _____

I hereby authorize you to submit/verify the following information to Grosse & Quade Management Co. your prompt attention to this matter will be greatly appreciated.

(Applicant's Signature)

Please complete /verify the following information (applicable section checked):

- Employment:** From: _____ To: _____
Position: _____
Salary: \$ _____ weekly/monthly/annually
Comments: _____

Supervisor Signature _____ Date: _____

- Length of Residency:** From: _____, 20____
To: _____, 20____
Rent: _____

Did applicant pay on time? yes no
Would you rent to this individual again? yes no
Comments: _____

Landlord Signature _____ Date _____

A self-addressed, stamped envelope is provided for your convenience. If you have any questions, please do not hesitate to call me at 215-855-8700. Thank you.

Sincerely,



Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification: <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶	
	<input type="checkbox"/> Other (see Instructions) ▶	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code		
List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number									
Employer identification number									

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

