



Associated Realty Property Management

Main Office:
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State College, PA 16801
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www.arpm.com

PARKING LEASE APPLICATION

NAME _____ DATE _____

SOCIAL SECURITY # _____ - _____ - _____

CURRENT ADDRESS _____

(STREET) (APT #)

(CITY) (STATE) (ZIP)

PHONE # _____ CELL # _____

HOME ADDRESS _____

(STREET)

(CITY) (STATE) (ZIP)

PHONE # _____

Applying for an apartment with Associated Realty? Yes _____ No _____

If no, you must attach a rental application fee of \$20.

Do you know where you will be living in the fall?

BUILDING _____ UNIT # _____

CAR INFORMATION:

LICENSE PLATE # _____ STATE _____

MAKE _____ MODEL _____

CAR COLOR _____ YEAR _____

PARKING LOCATION PREFERRED:

_____ as close to apartment assigned as possible

_____ any

_____ specific location only (PLEASE LIST) _____

*NOTE THAT PARKING SPACE LEASE TERMS ARE FOR ONE YEAR

OFFICE USE ONLY: BUILDING _____ SPACE # _____