



SHERMAN PROPERTY MANAGEMENT, INC.

www.go-sherman.com

York: (717)699-2229

fax: (717)699-2219

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fax: (717)698-3903



**“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: _____