

PLEASE READ THOROUGHLY

Return this entire signed parental form via snail mail to our office or give to your student to give to us. **Please make a copy of it for your records.**

Retain the copy of the lease given to your son or daughter for your records. Most questions can be answered on our website: www.strongstudentrentals.com

Parental Consent Form For Permission To Sign Strong's Rental Lease

Your son/daughter has signed the lease and has received a signed copy of the lease for your records. Please refer to it for all information (rental address, rent, late fees, and list of rules and regulations). All residents have a period of **10 days** after the date of the lease signing to return the *"Parental Consent Form For Permission To Sign Strong's Rental Lease"* to the owner or agent. **If the *"Parental Consent Form for Permission to Sign Strong's Rental Lease"* is not returned by the indicated date, Strong's Student Rental has the option to remove that Residents name from the lease. We have the option to NOT rent to a tenant who does not have parental co-signers.**

As Parental Co-Signer you are only financially responsible for your son or daughter. You will not be held financially responsible for the outstanding debt of any of the other residents who are party to the lease agreement incorporated by reference. Strong's Student Rental acknowledges and agrees that your financial responsibility is exclusive to the resident for whom this document applies.

PLEASE PRINT CLEARLY! ALL information is secure. It will NOT be shared with a third party. RESIDENTS MUST HAVE A PARENTAL/GUARDIAN CO-SIGNERS WHO WILL ASSUME ALL RESPONSIBILITIES AND PAYMENTS IF NEEDED. SIGNATURES FROM BOTH PARENTS/GUARDIANS ARE REQUIRED IF PARENTS ARE LEGALLY MARRIED.

Tenant's Information

Tenant's Complete Name: _____ Date of Birth (m/d/y) _____

Cell Phone: _____ Home Phone: _____

IUP Email (? @iup.edu): _____ Personal Email: _____

Year in School Next Fall: (Check One) ___ Freshmen ___ Sophomore ___ Junior ___ Senior

Are You Expecting a Student Loan? (Check One) ___ Yes ___ No

Home Address: _____

City: _____ State: _____ Zip code: _____

Have you rented with anyone in the past? Yes No

If yes, fill out the following: Rental Companies Name: _____

Contact person or landlord's Name: _____

Phone: _____

Please make sure this information is filled out by both Parental Co-Signers who will be held accountable for paying the rent if a problem arises with the tenant. Payments may be: cash, money order, check, Visa, Master Card, or Discover.

1st Parental/Guardian Co-Signer Information

Parent or Guardians Complete Name: _____ Are you a Jr. or a Sr. _____

Are you: Married (List spouse's name: _____) Single Divorced

Date of Birth (m/d/y) _____

Home Phone (if different from cell): _____ Cell Phone: _____

Email: _____ Place of Employment: _____

Work Phone: _____ Home Address: _____

City: _____ State: _____ Zip code: _____

If you are single or divorced (and have not remarried), and you are assuming FULL FINANCIAL RESPONSIBILITY for your son or daughter, a 2nd parental co-signer is not required. If you are single or divorced (and have not remarried) and your ex-spouse or another individual is assuming part or full responsibility for the rent, then that individual needs to fill out the 2nd Parental/Guardian Co-Signer Information. If you are married, your spouse must fill out the 2nd Parental/Guardian Co-Signer Information.

2nd Parental/Guardian Co-Signer Information

Parent or Guardians Complete Name: _____ Are you a Jr. or a Sr. _____

Date of Birth (m/d/y) _____

Home Phone: (if different from cell) _____ Cell Phone: _____

Email: _____ Place of Employment: _____

Work Phone: _____ Home Address: _____

City: _____ State: _____ Zip code: _____

Both Parental/Guardian Co-Signers need to read and sign for the below information. The below address and rent payments should be transferred from what was given to your son/daughter on their lease.

(Student's Name) _____ has my permission to sign a lease renting a house/apartment located at the following address: _____ for the time period of the Friday before the first day of fall semester classes through the day of spring semester graduation. The residents are each responsible for a rental fee in the amount of \$ _____ per resident per semester.

Please choose one of the following payment plans for your son or daughter. Residents must adhere to the plan they choose. All penalties and late fees will be applied according to the dates indicated with each plan. **Payments may be: cash, check, Visa or Master Card.**

_____ Plan #1: A lump sum payment for each semester due on or before September 14th for the Fall and February 4th for the spring.

_____ Plan #2: Two equal payments for each semester. Payments for the fall semester would be due July 1st and on or before September 14th. Payments for the Spring semester would be due November 1st and on or before February 4th.

Fall semester rent must be paid in full by September 14th, 2020. Spring semester rent must be paid in full by February 4th, 2021.

If the rent payment is received later than date, then a \$50.00 first day late charge plus \$10.00 per day thereafter is due in addition to the payment.

I further understand that the amount of \$250.00 in cash, money order, certified or cashier's check, visa or mastercard is due as a deposit on the date the lease is signed, subject to paragraph 10 on lease.

As legal guardians/parents of _____ we will accept full responsibility for the payment of the rent and utilities.

This permission form must be signed and dated by both parents and/or guardians co-signers who are sharing responsibility for the resident's rent. This form must be returned 10 days after the date of the lease signing.

Upon failure of the lessee, the student, to pay the installments of rent as due, keep all the covenants of the lease, which is hereby incorporated by reference, or remove from the premises at the determination of the same, then the lessee, and parents/guardians, hereby authorizes and empowers any attorney of any court of record of Pennsylvania, to appear in said court and confess a judgment in an immediate issuing of a writ of possession to include a clause for costs and rent due, without asking leave of court against the student and against the parents/guardians, an authorizes an attorney's commission of 15%.

(Information is continued on next page)

I understand and I agree that after signing the attached lease dated _____ between Strong's Student Rental

and the student/resident _____, I have 10 days to void this lease. After 10 days I will be responsible for payment of this lease even if I do not live in the apartment or house located at _____ . I understand and I agree that if my son or daughter decides not to reside at the apartment or house for any reason that I as the parental co-signer am still financially obligated to the terms of the lease.

As Parental Co-Signer you are only financially responsible for your son or daughter. You will not be held financially responsible for the outstanding debt of any of the other residents who are party to the lease agreement incorporated by reference. Strong's Student Rental acknowledges and agrees that your financial responsibility is exclusive to the resident for whom this document applies.

As Parental Co-Signer I understand the Replacement Resident Policy. Replacement Resident Policy:
Any resident who is party to the lease agreement and requests removal from said lease agreement for any reason must find a suitable replacement resident to take their place in the agreement. If the resident is unable to find a suitable replacement, both the resident and their parental cosigner are financially responsible for all of the terms and conditions of the lease agreement even if the resident chooses not to reside at the residence. Any potential replacements will have to be approved in writing by the other residents who are party to the lease agreement as well as Strong's Student Rental. The potential replacement resident is required to sign the lease, pay a security deposit and turn in a completed parental form. Subletting is not permitted. The resident requesting removal will not be removed from the lease until all of these requirements are completed and said resident will forfeit their security deposit upon removal from lease agreement.

Student/Resident (Print)

Student/Resident (Sign)

1st Parent/Guardian Co-Signer (Print)

1st Parent/Guardian (Sign)

2nd Parent/Guardian Co-Signer (Print)

2nd Parent/Guardian (Sign)

Strong's Student Rental Owner or Agent _____

Date _____

STRONG'S STUDENT RENTAL
442 KIMMEL RD.
HOME, PA 15747
(724) 463-7222
ssriup@hotmail.com

Please return this signed parental form to our above listed address. Please make a copy of it for your records.

***Most questions can be answered on our website: www.strongstudentrentals.com**

Retain the copy of the lease given to your son or daughter for your records.