

**Rakosky Rentals**

P.O. Box 610 Roscoe, PA 15477  
Phone: 724-938-2251(CAL1) Fax: 724-938-9247

Email: [rent@rakoskyrentals.com](mailto:rent@rakoskyrentals.com)  
Website: [www.rakoskyrentals.com](http://www.rakoskyrentals.com)

**Rental Application**

**Applicant's Personal Information**

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Driver's License: \_\_\_\_\_

\*\*Please attach a copy of your driver's license. \*\*

Social Security #: \_\_\_\_\_ Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Present and Permanent Address: \_\_\_\_\_

\_\_\_\_\_

**Employment Information:** Company: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Employment Reference: \_\_\_\_\_

References: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Parent's Names: \_\_\_\_\_

Parent's Phone: \_\_\_\_\_

Parent's Email: \_\_\_\_\_

Parent's Driver's License: \_\_\_\_\_

Emergency Contact Name/Number: \_\_\_\_\_

**Vehicle Identification Information**

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

Color: \_\_\_\_\_ License Plate Number: \_\_\_\_\_

Insurance Name and Policy Number \_\_\_\_\_

**Proof of Rental Insurance (if elected)**

Insurance Company \_\_\_\_\_

Policy Number \_\_\_\_\_

Please Ask that Rakosky Rentals be placed as an Additional Insured. Choosing to do this is for your own protection. Rakosky Rentals has Insurance on the building only. Your contents are not protected unless you choose to do so by having rental insurance.