



505 White Plains Road
Eastchester, NY 10709

Phone (914) 961-8875
Fax (914) 961-8939

Application Package

Application **MUST** include the following items:

- Completed and signed application
- Clear copy of Driver's License or other government-issued photo ID.
- Credit Check – within last 60 days for each applicant
- Letter from employer and most recent pay-stub, or proof of financials if retired (latest tax return)

Required at lease signing in *certified funds or cash*:

- First month's rent
- Two months security deposit

We do not discriminate against individuals because of their relationship or association with members of a protected class including race, color, national origin, religion, sex, familial status, disability, or other Federal Fair Housing Laws.

***Please complete the attached application thoroughly**

FOR OFFICE USE ONLY

Apt # _____ Location _____ Rent \$ _____
 Lease Period _____ to _____ Deposit \$ _____ Cash _____ Money Order _____ Check # _____
 Parking Space # _____ Vehicle Make _____ Model _____ Plate # _____ Color _____



Apartment Application

Interested in Apartment _____ Located at _____

Applicant #1 – Head of Household

Name _____ DOB: _____ Soc Sec # _____
Home Tel # _____ Cell # _____ Email _____
Present Address: _____
Landlord _____ Tel # _____ Fax # _____
Rent Paid: \$ _____ # of Rooms: _____ Length of Tenancy: _____
Occupation: _____ Gross Salary: \$ _____ per: week / month / bi-weekly / year
Company Name: _____ Address: _____
Length of Employment _____ Supervisor: _____ Tel # _____

Applicant #2 – Spouse/Roommate

Name _____ DOB: _____ Soc Sec # _____
Home Tel # _____ Cell # _____ Email _____
Present Address: _____
Landlord _____ Tel # _____ Fax # _____
Rent Paid: \$ _____ # of Rooms: _____ Length of Tenancy: _____
Occupation: _____ Gross Salary: \$ _____ per: week / month / bi-weekly / year
Company Name: _____ Address: _____
Length of Employment _____ Supervisor: _____ Tel # _____

Number of persons to occupy apartment – please include applicants & children

1. Name: _____ Relationship: _____ DOB: _____
2. Name: _____ Relationship: _____ DOB: _____
3. Name: _____ Relationship: _____ DOB: _____
4. Name: _____ Relationship: _____ DOB: _____
5. Name: _____ Relationship: _____ DOB: _____

References – Include name & telephone

Business: Name: _____ Tel #: _____
Business: Name: _____ Tel #: _____
Personal: Name: _____ Tel #: _____
Personal: Name: _____ Tel #: _____

Bank Accounts

Bank Name: _____ Address: _____
Names on Account: _____
Savings Acct #: _____ Checking Acct #: _____

Please answer the following YES or NO:

1. Do you have any cats, dogs, or other pets? Yes _____ No _____
2. Is your cat, dog, or other pet a service pet? Yes _____ No _____
3. Have you ever had bedbugs in your current residence? Yes _____ No _____
4. Do you smoke? Yes _____ No _____

PLEASE INITIAL to acknowledge the following:

- _____ I understand that non-service pets are **NOT** permitted in the building.
_____ I give my authorization for credit and criminal checks.
_____ I give my authorization for verification of employment salary history and current tenancy including my present address, timeliness of rent payments, and condition of apartment.
_____ I understand smoking is **NOT** permitted in apartments or common areas in and around building.



I hereby warrant that all my representation sets forth above are true. I further represent that I am not renting the apartment under any other name nor have I ever been evicted from any apartment, nor am I now being evicted, nor am I addicted to narcotics, nor have I ever been convicted of related offenses.

Signature of Applicant #1: _____ Date: _____

Signature of Applicant #2: _____ Date: _____

Background / General Information

HAVE YOU EVER:

Filed for Bankruptcy? _____ If yes, when? _____

Refused to pay rent when due? _____ If yes, what was the reason? _____

Been evicted from a tenancy or left owing money? _____ If yes, what was the reason? _____

Been convicted of a crime? _____ If yes, type of offense, county & state? _____

Been served a late rent notice? _____ If yes, when and why? _____

Used another name or alias? _____ If yes, please list names: _____

Had any recurring problems with your current apartment or landlord? _____ If yes, please explain: _____

Are you or a co-tenant/spouse or roommate on a Sex Offender registry? _____

When would you be able to move in? _____

Why are you moving from current address? _____

List any verifiable sources and amount of income you wish to have considered such as a job, social services, child support, alimony, etc. _____

We may run a credit check and a criminal background check. Is there anything negative we will find that you want to comment on? _____

How did you hear about this apartment? _____

Were you asked to move or was your lease not renewed? _____ If yes, why? _____

Vehicle Information

Make & Model: _____ Year: _____ Lic. # & State: _____

Make & Model: _____ Year: _____ Lic. # & State: _____

Authorization and Acknowledgement

I/we, the undersigned, authorize the Landlord and its agents to obtain an investigative consumer credit report including but not limited to credit history, landlord/tenant court research, criminal record search and registered sex offender search. I/we authorize the release of information from previous or current landlords, employers, and bank representatives. This investigation is for resident screening purposes only, and is strictly confidential. This report contains information compiled from sources believed to be reliable, but accuracy of which cannot be guaranteed. I/we hereby hold the Landlord and its agents free and harmless of any liability for any damages arising out of any improper use of this information. I/we hereby acknowledge that the neither super nor management in any way asked questions or treated me in a way that may be construed or interpreted to be discriminatory against me, the co-applicant and/or family members regarding race, gender, disability, sexual orientation, religion, age or other Federal Fair Housing Laws. I/we hereby acknowledge that if we submit false information with this application and should receive the apartment and Landlord later learns that said information provided by applicant is false, the applicant understands that the applicant's lease may be terminated by the Landlord as a result of providing said false information.

Signature of Applicant #1: _____ Date: _____

Print name: _____

Signature of Applicant #2: _____ Date: _____

Print name: _____

