

Consultant: _____

Date: _____



INVESTMENT • DEVELOPMENT • MANAGEMENT

45 CUTTERMILL ROAD, SUITE 1, GREAT NECK, NY 11021 P: (516) 487 9516 F: (516) 487 9514

www.adreny.com

RESIDENTIAL LEASE APPLICATION

Building : _____

APT NO. _____ APT. TYPE _____ MONTHLY RENT \$ _____ SECURITY \$ _____

REQUESTED LEASE START DATE _____ LEASE TERM 1 year 2 year

NAME OF APPLICANT (Leaseholder, Occupant or Guarantor)

Name	Social Security No.	1 <input type="checkbox"/> Prospective Tenant/Leaseholder
Phone (h)	(o)	(email)
		2 <input type="checkbox"/> Guarantor
		3 <input type="checkbox"/> Occupant/Roommate

Occupants	Relationship

IN CASE OF EMERGENCY -- NOTIFY

Name	Address	City/State	Phone	Relationship
			()	

If Guarantor Application, describe relationship to Applicant: _____

Names of others who will live in Apartment (but will not be on Lease): _____

Names and ages of visiting children: _____

Are you applying for consent to have a pet? No yes Describe (include weight) _____

Note: Maximum permitted 2 pets in the apartment at any one time.

Have you ever been evicted? no yes

Have you ever broken a lease? no yes Describe: _____

Have you ever been in Landlord/Tenant court? no yes Describe: _____

Have you ever declared bankruptcy? no yes Explain: _____

Have you ever rented from A.D. Real Estate Investors, Inc.? no yes When? _____

Building _____ Apt # _____

Citizen Status: U.S. Citizen Permanent Resident (green card) Temporary Resident (no green card)

PRESENT ADDRESS

Street	Apt. No.	City	State	Zip	Phone	Monthly Rent	How Long
					()	\$	

LANDLORD

Name	Address	Phone ()
Reason for Move: <input type="checkbox"/> 1 st Job <input type="checkbox"/> Larger Apt. <input type="checkbox"/> Smaller Apt. <input type="checkbox"/> Sold <input type="checkbox"/> Lease Expired <input type="checkbox"/> New Job <input type="checkbox"/> Transferee <input type="checkbox"/> New Hire		

PREVIOUS ADDRESS

Street	Apt. No.	City	State	Zip	Phone	Monthly Rent	How Long
					()	\$	

PREVIOUS LANDLORD

Name	Address	Phone
		()

EMPLOYMENT

Name of Company (If Student List School Name)	Title/Occupation	Address	City	State	Zip
Type of Employment: <input type="checkbox"/> Financial <input type="checkbox"/> Computer <input type="checkbox"/> Law <input type="checkbox"/> Entrepreneur <input type="checkbox"/> Medicine <input type="checkbox"/> Creative <input type="checkbox"/> Student <input type="checkbox"/> Other					
How Long	Annual Income \$	Supervisor Name/Phone	Bus. Phone (Direct)		
Salary \$	Bonus (if any) \$	Salary 04_____ Bonus04 _____	Salary05_____ Bonus05_____		

Previous Employer (if at present less than 3 yrs.)	Title/Occupation	Address	City	State	Zip
How Long					
Annual Income \$	Supervisor Name/Phone	Bus. Phone (Direct)			
Salary \$	Bonus (if any) \$	()			

BANKING INFO

Savings Bank	Address	Account #	Account in Name of
Checking	Address	Account #	Account in Name of

Note: Letter from employer on company letterhead verifying income is required. If self employed, letter from CPA verifying income is required.

OTHER INCOME

Sources	Amounts
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REFERENCES

CPA	Firm	Address	Phone ()
Attorney	Firm	Address	Phone ()

How did you find this apartment?

- NY Times Ad Sun Craig's list Website _____ Referral _____ Signs/Billboards
 Broker (list Company & Broker Name) _____

The Landlord will in no event be bound, nor will possession be given, unless and until a lease executed by the landlord has been delivered to the tenant. The applicant and his/her references must be satisfactory to the Landlord.

A.D. Real Estate Inc. shall in no event be liable as respects any matter concerning this application, or concerning any act of the Landlord or failure to act on the part of the Landlord in connection with this application, or in connection with any lease or leases contemplated herein. No representations or agreements by agents, brokers or others are binding on the Landlord unless included in the executed lease.

I hereby warrant that all my representations set forth herein are true. I recognize that the truth of the information contained herein is essential. I further represent that I am not renting a room or an apartment under any other name, nor have I ever been dispossessed from any apartment, nor am I now being dispossessed and that I am over 18 years of age.

I have been advised that I have the right to make a written request, directed to the appropriate credit reporting agency, within a reasonable time for a complete and accurate disclosure of the nature and scope of any credit investigation. I understand that upon submission, this application and all documents become the property of the Landlord of Agent, and will not be returned to me under any circumstances.

I authorize the verification of the above referenced information and its release to Landlord and its agents connected with the lease contemplated herein. I authorize A.D. Real Estate Inc. and Sanjeonics, and their agents to obtain a consumer credit report on me and to verify any information on this application with regard to my employment history current and prior tenancies and all other information, which the Landlord deems pertinent to my obtaining residency. I will present any other information required by the Landlord in connection with the lease contemplated herein.

I understand that the \$75.00 credit checking fee is non refundable.

APPLICANT SIGNATURE

DATE