



LEASE APPLICATION PROCESS

There is a **non-refundable fee of \$75** per applicant/ guarantor for the credit verification process. **ALL** documents concerning your application can be faxed to **212.251.9610** or emailed to rentals@535classon.com. For questions regarding your application, call **212.251.9600**.

Documents are due within 24 hours of the application. Please be prepared to sign a lease within 2 days of your APPROVED application. IF YOUR APPLICATION IS NOT COMPLETED WITHIN 48 HOURS, THE APARTMENT WILL BE PUT BACK ON THE MARKET.

DOCUMENTS NEEDED: Photo I.D. required for each application (please do not fax)

A. IF YOU WORK FOR A COMPANY:

- Employment Letter on Employer's letterhead verifying length of employment and annual income for past 2 years (include any bonus, rental allowance or additional income)
- Copy of your most recent two pay stubs indicating YTD details.
- If employed less than 2 years, prior W-2, first 2 pages of most recent tax return or employment letter from your prior employer.
- Three (3) most recent bank statements plus savings if needed. **Must indicate a minimum of 3 months on hand.**
- Letter of reference from your prior landlord or cancelled rent checks for past 3 months, or bank statement indicating rent payments.

B. IF YOU ARE SELF-EMPLOYED OR COMMISSION BASED:

- Letter from your accountant verifying length of employment, type of business and annual income for past 2 years.
- Copy of your complete federal income tax return for the past 2 years (including all schedules, W2 & 1099 forms.
- Letter of reference from your Landlord if applicable.
- Three (3) most recent bank statements plus savings if needed. **Must indicate a minimum of 6 months on hand.**

C. GUARANTOR REQUIREMENTS (monthly rent x 80)

- Income requirement \$ _____
- All items listed in A or B above (whichever is applicable)

NOTE: You will be required to submit separate cashier checks or money orders at your lease signing – one for the first month rent PLUS any prorated rent and the other for the security deposit. Please make all checks payable to: "Bonita Management Corp."



RESIDENTIAL LEASE APPLICATION

(Each Applicant and Guarantor Must Complete a Separate Application)

APPLICATION DATE: _____

Apt # _____ Apt. Type: _____ Monthly Rent \$ _____ Security \$ _____

Requested Lease Start Date: _____ Lease Term: 1 year 2 years

Check one: Prospective Tenant/ Leaseholder Guarantor

PERSONAL HISTORY

Name of Applicant: _____ Social Security #: _____ DOB: _____

Daytime Phone #: _____ Cell #: _____ Email: _____

Legal Basis for presence in US: US Citizen Permanent Resident (Green Card holder) Temporary Resident (no green card)

If Guarantor, describe relationship to Applicant: _____

Any Pets? YES NO If YES, # of pets? _____ Total Weight: _____ lbs Breed: _____

RENTAL/ RESIDENCE HISTORY

I. Current Address: _____ City: _____ State: _____ Zip: _____

Manager/ Landlord: _____ Phone #: _____ Was Rent Paid in Full? _____

Own/ Rent: Dates From: _____ To: _____ Reason for Leaving: _____

II. Previous Address _____ City: _____ State: _____ Zip: _____

Manager/ Landlord: _____ Phone #: _____ Was Rent Paid in Full? _____

Own/ Rent Dates From: _____ To: _____ Reason for Leaving: _____

EMPLOYMENT HISTORY

Current Employer: _____ How Long: _____ Occupation: _____

Address: _____ Work Email: _____

Position: _____ Annual Income: \$ _____ Other Source of income: _____

Supervisor's Name: _____ Supervisor's Phone: _____

Previous Employer: _____ How Long: _____ Occupation: _____

Address: _____ Work Email: _____

Position: _____ Annual Income: \$ _____ Other Source of income: _____

Supervisor's Name: _____ Supervisor's Phone: _____

EMERGENCY CONTACT

Name: _____ Address: _____

Phone: _____ Email: _____ Relationship: _____

Name: _____ Address: _____

Phone: _____ Email: _____ Relationship: _____

GENERAL INFORMATION

Have you ever broken a lease to an apartment? YES NO If so, explain _____

Have you ever been evicted from an apartment? YES NO If so, explain _____

Have you ever been sued for damages to an apartment? YES NO If so, explain _____

Have you been in Landlord-Tenant court? YES NO If so, explain _____

Have you ever filed for bankruptcy? YES NO If so, explain _____

Do you have any outstanding judgments? YES NO If so, explain _____

Have you ever been charged with a crime? YES NO If so, explain _____

Have you ever been convicted of a felony or misdemeanor? YES NO If so, explain _____

How did you find this apartment:

NY Times Ad Word of Mouth Signs/ Billboards Website (List Website) _____

Other Advertising Publication _____ Broker _____

ADDITIONAL INFORMATION

Please provide any additional information that you believe will assist us in evaluating your stability as a prospective tenant. This includes but is not limited to facts that reflect your character as well as activities or events that may impact the owner's decision to rent to you in a negative manner, such as allegations of professional or other misconduct in violation of law or adverse legal determinations.

AUTHORIZATION FORM FOR CONSUMER REPORTS OR INVESTIGATIVE CONSUMER REPORTS

In connection with your application for hiring of a dwelling and/or during tenancy, or application for employment and/or continued employment with the company (Please select applicable box), understand that consumer reports or investigative consumer reports which may contain public record information may be requested or made on you including consumer credit, criminal records, landlord-tenant court records, driving record, education, prior employer verification, workers compensation claims and others. These reports may include experience information along with reasons for termination of past employment. Further, understand that information from various Federal, State, local and other agencies which contain your past activities may be requested. A consumer report or investigative consumer report containing injury and illness records and medical information may be obtained only after a tentative offer of employment has been made.

By signing below, you hereby authorize without reservation, any part or agency contacted by **[Client Name]** or CoreLogic SafeRent, Inc., to furnish the above-mentioned information. You further authorize ongoing procurement of the above-mentioned reports at any time during tenancy or employment (or contract). You also agree that a fax or photocopy of this authorization with your signature be accepted with the same authority as the original. By signing below, you also authorize without reservation CoreLogic SafeRent, Inc. to provide an applicant's information to various government, law enforcement, and Consumer Reporting Agencies.

You have the right to make a request of CoreLogic SafeRent, Inc., upon proper identification and the payment of any legally permissible fees, for the information in its files on you at the time of your request.

You hereby authorize and request, without any reservation, any present or former employer, school, police department, financial institution, division of motor vehicles, consumer reporting agencies, or other persons or agencies having knowledge about you to furnish CoreLogic SafeRent, Inc. with any and all background information in their possession regarding you, in order that your employment qualifications may be evaluated.

For California, Minnesota or Oklahoma applicants only, if you would like to receive a copy of the consumer report, if one is obtained, please check this box. If checked and you are a California applicant, a copy of the consumer report will be sent within three (3) days of the employer receiving a copy of the consumer report.

For California applicants only, if public record information about your character, general reputation, personal characteristics, and mode of living is obtained without using a consumer reporting agency, you will be supplied a copy of the public record information within seven (7) days of the employer's receipt unless you check this box where you hereby waive your right to obtain a copy of the consumer report.

Full Name: First: _____ Middle: _____ Last: _____

Current Street Address: _____ Apt.#: _____

City: _____ State: _____ Zip: _____

Social Security or Individual Tax Identification Number (ITIN): _____

Drivers License/ID Number: _____ Drivers License/ID State: _____

The following is for identification purposes only to perform the background check.

Date of Birth: _____ / _____ / _____ Race: _____ Gender: (M or F) _____
(MM/DD/YYYY)

List Maiden or Other Names Used: _____

Professional License: _____ State: _____ Type: _____ Number: _____

Signature: _____ Date: _____



CREDIT CARD AUTHORIZATION

Property Address: _____ Apt #: _____ City: _____ State: _____

Terms: The name that will appear on your credit card statement is **"Bonita Management Corp d/b/a 535 Classon"**
The credit check fee is non-refundable. **PLEASE KEEP A COPY OF THIS AS YOUR RECEIPT.**

Check one: Visa MasterCard Discover

Credit Card Number: _____

Expiration Date: _____

3 Digit Security Code: _____

Fee Amount: \$ _____

Cardholder's Contact

Name: _____

Phone Number: _____

Cardholder Billing Address

Street: _____ City: _____ State: _____ Zip: _____

I hereby authorize **Bonita Management Corp. d/b/a 535 Classon** to charge my credit card as described above for tenant screening services to be rendered pursuant to an application for tenancy at the property described above.

Cardholder's Signature: _____ Date: _____



Ph: 212.251.9600 | Fax: 212.251.9600 | rentals@535classon.com

RENTAL HISTORY VERIFICATION

Tenant Name: _____

Tenant Address: _____

Is this a current tenant? Yes No

If this is **NOT** a current tenant, please indicate if:

Proper notice was given The tenant was asked to leave The security deposit was refunded

Was the tenant's name on the lease? Yes No Monthly Rent: \$ _____

Was this tenant a prompt payer? Yes No

Date Occ. Started: ____/____/____ Lease End Date/ Move-Out Date: ____/____/____

Was the lease fulfilled? Yes No # of Late Notices: _____ # of Bounced Checks: _____

Did you document any complaints regarding noise, pets, smoking or parking? Yes No

If Yes, Please describe:

Were there any pets in the unit? Yes No

Were any of the pets unauthorized? Yes No

Did the pets, if any, cause damage? Yes No

Current Account Standing:

Paid in Full Yes No Overdue Yes No Referred to Collections Yes No

Profit/ Loss Writeoff Yes No Eviction Proceedings Begun Yes No

Other _____

Would you rent to the tenant again? Yes No

Additional Comments: _____

Thank you!

Please fax to **Bonita Management Corporation** at **212.251.9610** or email: rentals@535classon.com

The information stated here and above is true and complete to the best of my knowledge.

Name: _____ Title: _____ Contact # _____

Signature: _____ Date: _____