

50 West 17th Street, New York, NY 10011

T: 212.896.8600 | F: 212.896.8666 | argo.com

# **Rental Application**

App	lication Overvie	w			
		E 424 <sup>TH</sup> CTREET			
		5 134 <sup>TH</sup> STREET			
Mont	thly Rent:	Secu	rity Deposit:		
Lease	e Term (1 or 2 years):				
Lease	e Start Date:	Leas	Lease End Date:		
Prima	ary Applicant:				
Phon	e:	Cell:	E	mail:	
		SS#:			
Phon	e:	Cell:	E	mail:	
<u> </u>	MUST BE ON COI	& Salary / Income Verification Letter  MPANY LETTERHEAD AND INCLUDE SALARY, LENGTH OF EM  EMPLOYED PLEASE ENCLOSE A NOTARIZED LETTER FROM YO		VISOR/HR CONTACT	
		nt(s) for ALL Accounts (previous two (2) months GES OF EACH STATEMENT, INCLUDING BLANK PAGES AND C		KS.	
<u> </u>	MUST INCLUDE N	ord / Managing Agent Reference Letter MONTHLY RENT, LENGTH OF OCCUPANCY, REFEREE'S CONTA LY OWN YOUR OWN HOME, PLEASE PROVIDE PROOF OF OW			
<u> </u>	MUST INCLUDE A	I Income Tax Returns, W2 forms and/or 1099 fo LL SCHEDULES & PAGES, AND BE SIGNED. APPLICATIONS SU ECENT TAX RETURN OR A COPY OF YOUR EXTENSION AND TO	BMITTED AFTER APRIL 1		
Che	cks Due Upon Su	bmission			
1. 2. 3.	1 <sup>s</sup>	redit Check Fee / per person (non-refundable)  t Months Rent (MUST be Certified/Cashier's Check) ecurity Deposit (MUST be Certified/Cashier's Check)	Payable to: Payable to: Payable to:	ARGO REAL ESTATE, LLC WINDSOR OXFORD COMPANY WINDSOR OXFORD TENANT SECURITY ACCOUNT	
4.	Br	okerage Fee (MUST be Certified/Cashier's Check)	Pavable to:	ARGO REAL ESTATE, LLC	

## Residence History

Applicant			
Current Address:	City:	State:	Zip:
Length of Residency:	Monthly Rent / Mortgage Payment: _		
Landlord / Managing Agent:	Phone:	Fax:	
Previous Address:	City:	State:	Zip:
Length of Residency:	Monthly Rent / Mortgage Payment: _		
Landlord / Managing Agent:	Phone:	Fax:	
Co-Applicant			
Current Address:	City:	State:	Zip:
Length of Residency:	Monthly Rent / Mortgage Payment: _		
Landlord / Managing Agent:	Phone:	Fax:	
Previous Address:	City:	State:	Zip:
Length of Residency:	Monthly Rent / Mortgage Payment:		
Landlord / Managing Agent:	Phone:	Fax:	
Employment Information			
Applicant			
Employer:	Phone:	Fax:	
Business Address:	City:	State:	Zip:
Length of Employment:	Annual Income:		
<u>Co-Applicant</u>			
Employer:	Phone:	Fax:	
Business Address:	City:	State:	Zip:
Length of Employment:	Annual Income:		

Rental Application [cont] Page 3 of 6

## **Business / Professional References**

	Applicant	Co-Applicant
1. Name:		1. Name:
Company:		Company:
Address:		Address:
Title / Position:		Title / Position:
Phone:		Phone:
2. Name:		2. Name:
Company:		Company:
Address:		Address:
Title / Position:		Title / Position:
Phone:		Phone:
Personal Reference	s	
	Applicant	Co-Applicant
1. Name:		1. Name:
Address:		Address:
Relationship to Applicant	::	Relationship to Applicant:
Phone:		Phone:
2. Name:		2. Name:
Address:		Address:
Relationship to Applicant	::	Relationship to Applicant:
Phone:		Phone:
Bank References		
	Applicant	Co-Applicant
Checking Account #:		Checking Account #:
Bank:	Branch:	Bank:Branch:
Savings Account #:		Savings Account #:
Bank:	Branch:	Bank:Branch:
Other Account #:		Other Account #:
Rank:	Pranch:	Rank: Rranch:

Rental Application [cont] Page 4 of 6

### **Statement of Income**

ANNUAL AMOUNT:	APPLICANT	CO-APPLICANT
Base Salary:		
Overtime:		
Bonuses:		
Commissions:		
Dividends & Interest:		
Real Estate Income (NET):		
Alimony / Child Support:		
Other Income:		
TOTAL INCOME:		
	TOTAL COMBINED ANNUAL INCOME:	

### **Additional Information**

Please answer the following: (if any of these questions are answered "YES", please provide details in the space provided or attach additional pages if needed)

1.	Do the applicants own any Real Property?			□ YES	□ NO
	if yes, list address(es):				
	Lender:	Balance of Loan:	Current Market Value:		
2.	Do the applicants own any Co-operative Apa	rtments?		□ YES	□ NO
	if yes, list address(es):				
	Lender:	Balance of Loan:	Current Market Value:		
3.	Do the applicants own any Stock or Bonds?			□ YES	□ NO
	Company Name:	Stock / Bond #	#:	D	escription:
	Company Name:	Stock / Bond #:	Description:		
4.	Do the applicants own any other assets?			□ YES	□ NO
	please describe:				
5.	Are there any outstanding judgments against	either the Applicant or Co-Appl	licant?	□ YES	□ NO
	please describe:				
6.	Has either the Applicant or Co-Applicant decl	ared bankruptcy in the past 10	years?	□ YES	□ NO
	please describe:				
7.	Has either the Applicant or Co-Applicant had	property foreclosed upon or giv	en title or deed in lieu thereof?	□ YES	□ NO
	please describe:				
8.	Is either the Applicant or Co-Applicant oblige	d to pay Alimony, Child Support	, or Separate Maintenance?	□ YES	□ NO
	please describe:				
9.	Is either the Applicant or Co-Applicant party	n a lawsuit?		□ YES	□ NO
	please describe:				
10.	Is either the Applicant or Co-Applicant co-ma	ker or endorser of a note?		□ YES	□ NO
	please describe:				
11.	Do you plan to keep any pets in this apartme	nt?		□ YES	□ NO
	please describe (species/breed/weight/age/etc):				
12.	Do you plan to play any musical instruments	in this apartment?		□ YES	□ NO
	please describe:				

Rental Application [cont] Page 5 of 6

## Additional Information [cont]

Please list the name, relationship, age, and Social S	ecurity Number of each p	erson who will reside in the apa	artment besides the applicant a	and co-applicant.
Name	Relationshi	o Social Se	curity No.	
Guarantor Information				
Please complete this section if you will be having a	third party guarantee you	ır full performance of the Lease	<u>}.</u>	
Guarantor:		SS#:		
Phone:	Cell:		Email:	
Current Address:		City:	State:	Zip:
Employer:		Phone:	Fax:	
Business Address:		City:	State:	Zip:
Annual Income:	Length of Employm	ent:	<del></del>	
Relationship to Applicant(s):				
Any individual acting as a guarantor will need to pro	ovide the following suppo	orting documentation:		
<ol> <li>Employment &amp; Salary / Income Verification Le</li> <li>Bank Statement(s) for ALL Accounts (previous</li> </ol>				
3. Latest Federal Income Tax Returns, W2 forms	and/or 1099 forms			
4. Credit Report Authorization (and applicable fe	ee)			
D / Ath				
Representations / Authorizations				
Credit Release in Compliance with Section 606 of the Fair The Undersigned authorize the Owner/Property Manage	r to retain credit reporting		· · · · · · · · · · · · · · · · · · ·	
information on our character, general reputation, personal  Non-Military Representation:	cnaracteristics and mode of	iiving. This authorization automatic	ally expires upon the termination of	our tenancy.
Non-vimitary Representation.  The Undersigned represent that we are not members of ar support.	y branch of the United State	s Military, and are not relying on th	ne income of any member of the Un	nited States Military for financial
The foregoing application has been carefully prepared, a Furthermore the applicant(s) acknowledge and authorize A				n is complete, true and correct.
Applicant's Signature	Date:	Co-Applicant's Signature		Date:



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### <u>Credit Report Authorization</u> (page 1 of 2)

I/We authorize Argo Real Estate LLC and or/its agents to obtain a tenant background search or consumer report through *CoreLogic Saferent c/o Consumer Relations Department* 7300 Westmore Road, Suite 3, Rockville, MD 20850-523 and any other information it deems necessary, for the purpose of evaluating my application. I/We understand that such information may include, but is not limited to credit history, housing court, sex offender search, criminal background check, employment/income verification, prior residency verification and/or any other necessary information. I/We understand that subsequent consumer reports may be obtained and utilized under this authorization in connection with an update, renewal, extension or collection, with respect to or in connection with the rental of a residence for which application was made. I/We agree to hold the above named company and procurer or furnisher of information, free from any liability what-so-ever in the use, procurement, or furnishing of such information. I/We further consent and authorize Argo Real Estate LLC and/or its agents to furnish this information to the Board of Directors, and/or its agents of the cooperative building or condominium to which I/We have applied, or to the Landlord of the rental apartment and his/her agents.

### Pursuant to federal and state law:

- 1. If the Landlord takes adverse action against you on the basis of information contained in a tenant screening report, the Landlord must notify you that such action was taken and supply you with the name and address of the consumer reporting agency that provided the tenant screening report on the basis of which such action was taken;
- If any adverse action is taken against you based on information contained in a consumer screening report, you have the right to inspect and receive a free copy of the report by contacting the consumer reporting agency;
- 3. Every tenant or prospective tenant is entitled to one free tenant screening report from each national consumer credit reporting agency (Equifax, Experian and TransUnion) annually, in addition to a credit report that should be obtained from <a href="mailto:annualcreditreport."><u>.annualcreditreport.</u></a>; and
- 4. Every tenant or prospective tenant may dispute inaccurate or incorrect information contained in a tenant screening report directly with the consumer reporting agency.

Signature of Applicant	Date
Signature of Co-Applicant	Date
Signature of Guarantor	 Date

## <u>Credit Report Authorization Form</u> (page 2 of 2)

Applicant's Name (print)	Applicant's Signatu	ıre
Social Security #:	_Date of Birth:	Phone:
Current Address:	City:	_State:Zip:
Co-Applicant's Name (print)	Co-Applicant's Sign	nature
Social Security #:	_Date of Birth:	Phone:
Current Address:	City:	_State:Zip:
Guarantor's Name (print)	Guarantor's Signat	ure
Social Security #:	_Date of Birth:	Phone:
Current Address:	City:	State:Zip:

#### Authorization for Electronic Debit:

You are hereby on notice that all checks submitted to this office can be processed electronically, at first presentment, and any re-presentments, by transmitting the amount of the check, routing number, account number and check serial number of your financial institution. By submitting a check for payment, you are authorizing us to initiate an electronic debit from your bank or asset account as early as the same day the check is received in our office. Please note that you will not receive a cancelled check with your bank or asset account statement with respect to any checks processed electronically, but such amounts will appear as debits on the statement issued by your bank or asset account.