

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, Guarantor)

Name	Birth Date	Social Security No.	Daytime Phone Number	<input type="checkbox"/> 1 Prospective Tenant/Leaseholder <input type="checkbox"/> 2 Guarantor <input type="checkbox"/> 3 Occupant/Roommate
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CO-APPLICANTS

List all Names

IN CASE OF EMERGENCY - NOTIFY

Name	Address	City / State	Phone ()	Relationship
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E-Mail: _____

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): _____

Permitted weight up to fifty (50) lbs. (fully grown) - maximum permitted: 1 dog or 2 cats.

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 Rockrose? no yes When?: _____ Building: _____ Apt.# _____

Legal basis for presence in U.S.: US Citizen Permanent Resident (green card) Temporary Resident (no green card)

PRESENT ADDRESS

Street	Apt. No.	City	State	Zip	Phone ()	Monthly Rent	How Long
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PRESENT LANDLORD

Name	Address	Phone ()
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PREVIOUS ADDRESS

Street	Apt. No.	City	State	Zip	Phone ()	Monthly Rent	How Long
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PREVIOUS LANDLORD

Name	Address	Phone ()
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EMPLOYMENT

Name of Company (If Student List School Name)	Title/Occupation	Address	City	State	Zip
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How Long	Annual Income	Supervisor Name / Phone	Bus. Phone (Direct)
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Salary	Bonus(if any)	()
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Previous Employer (If at present less than 3 yrs.)	Title/Occupation	Address	City	State	Zip
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How Long	Annual Income	Supervisor Name / Phone	Bus. Phone (Direct)
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Salary	Bonus(if any)	()
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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

Savings Bank	Address	Account #	Account in Name of
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Checking	Address	Account #	Account in Name of
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CPA	Firm	Address	Phone ()
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Attorney	Firm	Address	Phone ()
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How did you find this apartment? 1: NY Times Ad 2: Other Advertising Publication 3: Website 4: Word of Mouth 5: Signs/Billboards

6: Broker (list Company & Broker Name) 7: Other(describe) _____

By signing this application, I represent, warrant, confirm and agree that:

- ◆ **Credit History and Other Information:** Rockrose Development Corp. as agent for the landlord ("Rockrose") is authorized to obtain a credit history and other information about me (including employment, income and asset information and any criminal history) through its own investigation and from others. Anyone receiving a request is authorized to provide information to Rockrose without liability to me.
- ◆ **Fair Credit Reporting Act Notice.** Rockrose has disclosed to me that the investigation described above may include Rockrose's requesting a credit report which would investigate my character, general reputation, personal characteristics and mode of living. Rockrose has advised me that I have the right to request, within a reasonable period of time after I sign this Application, a complete and accurate disclosure of the nature and scope of the investigation requested as well as a written summary of the rights of the consumer prepared pursuant to section 609© of the Fair Credit Reporting Act.
- ◆ **Approval:** Application approval is at Rockrose's discretion (except Rockrose is committed to honoring all applicable equal housing opportunity laws). Even if this Application is approved, there will be no lease agreement unless and until Rockrose's form of lease and related documents have been fully signed and delivered by all parties.
- ◆ **Fees Non-Refundable:** All applications fees are non-refundable (whether or not this Application is approved).
- ◆ **Availability and Start Date:** Rockrose is not responsible for any change in the availability of the Apartment or any change or delay in the lease start date.
- ◆ **No Alterations to Apartment:** Among other things, the lease will not permit me to make changes to the Apartment without Rockrose's prior written consent.
- ◆ **Dispute Resolution:** Any dispute between Rockrose and the undersigned is to be resolved by the New York Courts (in New York County) applying New York Law (except as may be provided otherwise by a non-waivable provision of Federal law).
- ◆ **Legal Capacity:** I am at least 18 years old and all information in this Application is true, correct and complete.

APPLICANT

WITNESS

NOTICE TO TENANTS & PROSPECTIVE TENANTS REGARDING TENANT SCREENING REPORTS

YOU, AS A TENANT OR PROSPECTIVE TENANT, HAVE SUBMITTED A RENEWAL OR INITIAL APPLICATION TO LEASE APARTMENT ___ IN THE BUILDING LOCATED AT _____, N.Y.:

1. THE INFORMATION THAT YOU PROVIDED TO THIS OFFICE IN CONNECTION WITH A RENEWAL OR INITIAL APPLICATION TO LEASE AN APARTMENT, INCLUDING BUT NOT LIMITED TO YOUR NAME, ADDRESS, CONTACT INFORMATION, SOCIAL SECURITY NUMBER, EMPLOYMENT HISTORY, RENTAL HISTORY OR OTHER INFORMATION PERTINENT TO ENTERING INTO A LEASE, MAY BE USED TO OBTAIN A TENANT SCREENING REPORT. THE NAME AND ADDRESS OF THE CONSUMER REPORTING AGENCY WHICH MAY BE USED TO OBTAIN SUCH TENANT SCREENING REPORT IS:

Experian Consumer Assistance
701 Experian Parkway
P.O. Box 2002
Allen, TX 75013
Phone: 888-397-3742
www.experian.com/reportaccess

2. PURSUANT TO FEDERAL AND STATE LAW:

A. IF THIS OFFICE TAKES ADVERSE ACTION AGAINST YOU BASED ON INFORMATION IN A TENANT SCREENING REPORT, THIS OFFICE MUST NOTIFY YOU THAT ADVERSE ACTION WAS TAKEN AND SUPPLY THE NAME AND ADDRESS OF THE CONSUMER REPORTING AGENCY THAT PROVIDED THE TENANT SCREENING REPORT; AND

B. IF ADVERSE ACTION IS TAKEN AGAINST YOU BASED ON INFORMATION IN A TENANT SCREENING REPORT, YOU HAVE THE RIGHT TO RECEIVE AND TO INSPECT A FREE COPY OF SUCH TENANT SCREENING REPORT BY CONTACTING THE CONSUMER REPORTING AGENCY. YOU ARE ENTITLED TO ONE FREE TENANT SCREENING REPORT FROM EACH NATIONAL CONSUMER REPORTING AGENCY ANNUALLY, IN ADDITION TO A CREDIT REPORT THAT SHOULD BE OBTAINED FROM WWW.ANNUALCREDITREPORT.COM

3. YOU MAY DISPUTE INACCURATE OR INCORRECT INFORMATION CONTAINED IN A TENANT SCREENING REPORT DIRECTLY WITH THE CONSUMER REPORTING AGENCY.

VERY TRULY YOURS,

ROCKROSE DEVELOPMENT CORP.

I ACKNOWLEDGE RECEIPT OF THIS NOTICE ON THIS ____ DAY OF ____, 20__.

SIGNATURE

PRINT NAME