

## **Rental Requirements Form**

Apartment Number:	Date:
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Address:\_\_

Requirements of a Prospective Tenant: Fully completed application
Letter of employment on a company letterhead stating salary, position & length of employment
Three most recent consecutive pay stubs
Two recent bank statements.
2010 & 2011 Tax returns (first two pages)
Additional proof of income (i.e. trust funds, stocks, bonds, accountant's letter, etc.)
Letter of reference from previous landlord
Photo I.D.
Requirements of a Prospective Guaranator: Fully completed application
Letter of employment on a company letterhead stating salary, position & length of employment
2010 & 2011 Tax returns (first two pages, including signature page)

\_\_\_\_\_ Two recent bank statements

- \_\_\_\_\_Additional proof of income (i.e. mutual funds, stocks, bonds, accountant's letter, etc.)
  - Photo I.D.

In addition to the aforementioned requ	uirements p	please bring the following payments
APPLICATION PROCESS FEE	\$	PAYABLE TO:
FIRST MONTHS RENT	\$	PAYABLE TO:
SECURITY DEPOSIT	\$	PAYABLE TO:
BROKERAGE COMMISSION	\$	PAYABLE TO: (depends on the brokerage companies involved)



# Lease Application

Building: Apt #	Rent: \$	Security \$
Lease Start Date:	Lease Term:	Landlord:
Agent Name:		
Applicant Information:		
Name:		ber:
Date of Birth:	Home Telephone:	
Cellular Telephone:	Business Telephone	:
E-Mail Address:	-	
Residency:		
Present Address:		
City/State/Zip	City/State/Zip :	
Landlord's Name:	Landlord's Telephon	e Number:
How long have you been at this address?	Monthly Rent: \$	
Previous Address: (If current is less than 2 years)		
Landlord's Name:	Landlord's Address:	
Landlord's Telephone:	How long have you l	been at this address?
Employment:		
Company Name:	_ Company Address:_	
Job Description:		
Supervisor's Name:	Telephone Number:	
Annual Salary: \$	Length of Employmer	nt:
Additional Income: (Source)	Annual Compensatio	n:
Financial Information:		
Name of Bank:	Branch Location:	
Contact:		
Account Type:	Number:	



Business References	
Accountant Name:	Telephone Number:
Attorney Name:	Telephone Number:

In Case of an Emergency Please Notify:	
Name:	Address:
Telephone Number:	Relationship to you:

## Authorization to Release Information:

I hereby authorize XL Real Property Management and/or their assigned credit bureau to obtain any and all information regarding my employment, checking and/or savings accounts, credit obligation, rental information and all other credit matters which they may require in connection to lease an apartment. This consent is effective for a period of six months from this application is signed. This form may be reproduced or photocopied and that shall be as effective as the original document I have signed.

Signed:\_\_\_\_\_

Date:\_\_

		get Housing Rental Based Paint and Lea	ls and Leases ad-Based Paint Hazards
hazards if not taken care of proper	ly. Lead exposure andlords must dis	is especially harmful close the presence of	, paint chips, and dust can pose health I to young chilkdren and pregnant women. f known lead-based paint and lead-based proved pamphlet on lead poisoning
Lessor's Disclosure (initial)			
(a) Presence of lead-bas	-	•	
	int and/or lead-d	based paint nazards	are present in the housing (explain)
Lessor has no knowle	dge of lead-base	ed paint and/or lead	d-based paint hazards in the housing.
(b) Records and reports a		•	
•			and reports pertaining to lead-based at documents below)
Lessor has no reports in the housing.	or records perta	aining to lead-based	d paint and/or lead-based paint hazards
Lessee's Acknowledgment (in (c) Lessee has received ( (d) Lessee has received t	copies of all info		
Agent's Acknowledgment (init (e) Agent has informed th his/her responsib	ne lessor of the l		nder 42 U.S.C. 4582(d) and is aware of
Certification of Accuracy The following parties have revie the information provided by the s			ify, to the best of their knowledge, that
Lessor	Date	Lessor	Date
Lessee	Date	Lessee	Date
Agent	Date	Agent	Date

#### WINDOW GUARDS REOUTRED

### LEASE NOTICE TO TENANT

You are required by law to have window guards installed if a child 10 years of age or younger lives in your apartment.

Your Landlord is required by law to install window guards in your apartment:

• if you <u>ask</u> him to put in window guards at any time (you need not give a reason)

OR

• if a child 10 years of age or younger lives in your apartment.

It is a violation of law to refuse, interfere with installation, or remove window guards where required.

CHECK ONE

CHILDREN 10 YEARS OF AGE OR YOUNGER LIVE IN MY APARTMENT

NO CHILDREN 10 YEARS OF AGE OR YOUNGER LIVE IN MY APARTMENT

I WANT WINDOW GUARDS EVEN THOUGH I HAVE NO CHILDREN 10 YEARS OF AGE OR YOUNGER

## TENANT (PRINT)

#### TENANT SIGNATURE

#### FOR FURTHER INFORMATION CALL:

WINDOW FALLS PREVENTION PROGRAM NEW YORK CITY DEPARTMENT OF HEALTH 253 BROADWAY 6<sup>TH</sup> FLOOR NEW YORK, NY 10007 (212) 676-2158



State of New York **Division of Housing and Community Renewal** Office of Rent Administration Web Site: www.nysdhcr.gov

## **NOTICE TO TENANT** DISCLOSURE OF BEDBUG INFESTATION HISTORY

Pursuant to the NYC Housing Maintenance Code, an owner/managing agent of residential rental property shall furnish to each tenant signing a vacancy lease a notice that sets forth the property's bedbug infestation history.

Name of tenant(s):

Subject Premises:

Apt. #:

Date of vacancy lease:

# **BEDBUG INFESTATION HISTORY**

(Only boxes checked apply)

[]	There is no history of any bedbug infestation within the past year in the building or in any
	apartment.

[]	During the past year the building had a bedbug infestation history that h	as been the subject of
	eradication measures. The location of the infestation was on the	floor(s).

- [] During the past year the building had a bedbug infestation history on the floor(s) and it has not been the subject of eradication measures.
- [] During the past year the apartment had a bedbug infestation history and eradication measures were employed.
- [] During the past year the apartment had a bedbug infestation history and eradication measures were not employed.
- [] Other: \_\_\_\_\_\_.

Signature of Tenant(s): \_\_\_\_\_ Dated: \_\_\_\_\_

Signature of Owner/Managing Agent: \_\_\_\_\_ Dated: \_\_\_\_\_ DBB-N (9/10)