



LEMLE & WOLFF, INC.

EST. 1938

5925 BROADWAY, BRONX, N.Y. 10463

(718) 884-7676 • FAX (718) 884-5300

REAL ESTATE MANAGEMENT • DEVELOPMENT • REHABILITATION • MORTGAGES • INSURANCE

Office use only:

DATE SUBMITTED: _____

Residential Rental Application

Anyone using this application WILL NOT be charged a Broker fee. Make sure that you bring "copies" of all the required documents, we will not accept originals. Any paperwork submitted with the application will not be returned to the applicant/s.

BOROUGH - PLEASE INDICATE PREFERENCE: BRONX MANHATTAN

CHOICE OF UNIT: Home Tax Credit Rent Stabilized Other

OF BEDROOMS DESIRED: Studio 1 2 3 4 other

ADDRESS YOU ARE APPLYING FOR: _____
(Street) (Apt. #) (Borough) (Zip Code)

DESIRED MOVE-IN DATE: _____

HOW DID YOU HEAR ABOUT US? _____

NOTICE TO APPLICANTS

ALL PERSONS OVER THE AGE OF 18 WILL BE SUBJECT TO A CREDIT SCREENING REPORT WHICH IS OBTAINED THROUGH YARDI RESIDENT SCREENING.

YOU ARE ENTITLED TO OBTAIN A FREE COPY OF CREDIT REPORTS ANNUALLY FROM EACH CREDIT REPORTING AGENCY, AND THERE IS A RIGHT TO DISPUTE ANY INACCURACIES OR INCORRECT INFORMATION IN THE REPORT WITH THE AGENCY LISTING THE REPORT.

PERSONAL INFORMATION

APPLICANT'S FULL NAME: _____
(First) (Middle) (Last)

DATE OF BIRTH (MM/DD/YY): _____ SOCIAL SECURITY NUMBER: _____

TELEPHONE NUMBER/S: () ()

CO-APPLICANT'S FULL NAME: _____
(First) (Middle) (Last)

DATE OF BIRTH (MM/DD/YY): _____ SOCIAL SECURITY NUMBER: _____

TELEPHONE NUMBER/S: _____
HOME WORK CELL

DO YOU EXPECT A CHANGE IN HOUSEHOLD COMPOSITION? Yes No

EXPLAIN: _____

DOES THE APPLICANT OR OTHER FAMILY MEMBER WHO WILL LIVE IN APARTMENT REQUIRE ANY TYPE OF REASONABLE ACCOMODATION?: Yes No

IF YES, EXPLAIN: _____

HAVE YOU EVER BEEN CONVICTED OF A MISDEMEANOR OR FELONY? Yes No

IF YES, EXPLAIN: _____

Revised 9/2012

FAMILY COMPOSITION

(Use the back of this page if you need to add more members)

LIST ALL PERSONS WHO WILL LIVE IN THE UNIT (Name)	RELATIONSHIP (Wife, son, Daughter, etc..)	SOCIAL SECURITY #	DATE OF BIRTH (MM/DD/YY)	FULL TIME STUDENT? YES OR NO

APPLICANT RESIDENCE HISTORY

- **PRESENT ADDRESS:** _____
(Address) (Street) (Apt. #) (Borough) (Zip Code)

IS THE LEASE IN YOUR NAME? ____ Yes ____ No IF NOT, RELATIONSHIP TO LEASE HOLDER: _____

AT CURRENT ADDRESS FROM: _____ to PRESENT
(Month/Year)

LANDLORD TELEPHONE #: (_____) RENT: \$ _____

LANDLORD OR MANAGEMENT COMPANY ADDRESS: _____

REASON YOU WANT TO MOVE: _____

- **PREVIOUS ADDRESS:** _____
(Address) (Street) (Apt. #) (Borough) (Zip Code)

PREVIOUS ADDRESS FROM: _____ TO: _____
(Month/Year) (Month/Year)

WAS THE LEASE IN YOUR NAME? ____ Yes ____ No IF NOT, RELATIONSHIP TO LEASE HOLDER: _____

LANDLORD TELEPHONE #: _____ RENT: \$ _____

LANDLORD OR MANAGEMENT COMPANY ADDRESS: _____

REASON YOU MOVED: _____

CO-APPLICANT RESIDENCE HISTORY

- **PRESENT ADDRESS:** _____
(Address) (Street) (Apt. #) (Borough) (Zip Code)

IS THE LEASE IN YOUR NAME? ____ Yes ____ No IF NOT, RELATIONSHIP TO LEASE HOLDER: _____

AT CURRENT ADDRESS FROM: _____ to PRESENT
(Month/Year)

LANDLORD TELEPHONE #: (_____) RENT: \$ _____

LANDLORD OR MANAGEMENT COMPANY ADDRESS: _____

REASON YOU WANT TO MOVE: _____

- **PREVIOUS ADDRESS:** _____
(Address) (Street) (Apt. #) (Borough) (Zip Code)

PREVIOUS ADDRESS FROM: _____ TO: _____
(Month/Year) (Month/Year)

WAS THE LEASE IN YOUR NAME? ____ Yes ____ No IF NOT, RELATIONSHIP TO LEASE HOLDER: _____

LANDLORD TELEPHONE #: _____ RENT: \$ _____

LANDLORD OR MANAGEMENT COMPANY ADDRESS: _____

REASON YOU MOVED: _____

CONTACT INFORMATION

IN CASE OF AN EMERGENCY NOTIFY: (Name) _____

RELATIONSHIP _____ TELEPHONE #: _____

ADDRESS _____
(Street) (Apt. #) (Borough) (Zip Code)

***Please use the back of this application if
applicants have more than one job.**

EMPLOYMENT INFORMATION

➤ APPLICANT

Employed Full Time _____ Part Time _____ Unemployed _____ EMPLOYED SINCE: _____
(Month/Year)

PRESENT INCOME (Gross-before taxes): \$ _____ Hourly Weekly Bi-weekly Monthly Bi-monthly (Circle one)

EMPLOYED BY: _____ POSITION: _____

SUPERVISOR NAME: _____ TELEPHONE #: _____

ADDRESS: _____
(Address) (Street) (Apt. #) (Borough) (Zip Code)

Other source of Income \$ _____ Weekly Bi-weekly Monthly Bi-monthly (Circle one) _____
Type

➤ CO-APPLICANT

Employed Full Time _____ Part Time _____ Unemployed _____ EMPLOYED SINCE: _____
(Month/Year)

PRESENT INCOME (Gross-before taxes): \$ _____ Hourly Weekly Bi-weekly Monthly Bi-monthly (Circle one)

EMPLOYED BY: _____ POSITION: _____

SUPERVISOR NAME: _____ TELEPHONE #: _____

ADDRESS: _____
(Address) (Street) (Apt. #) (Borough) (Zip Code)

Other source on Income \$ _____ Weekly Bi-weekly Monthly Bi-monthly (Circle one) _____
Type

Do you anticipate any changes in the household income within the next 12 months:

Yes _____ ***No*** _____

Please explain:

ADDITIONAL EMPLOYMENT INFORMATION

➤ OTHER ADULT RESIDENT (if applicable)

Employed Full Time _____ Part Time _____ Unemployed _____ EMPLOYED SINCE: _____
(Month/Year)

PRESENT INCOME (Gross-before taxes): \$ _____ Hourly Weekly Bi-weekly Monthly Bi-monthly (Circle one)

EMPLOYED BY: _____ POSITION: _____

SUPERVISOR NAME: _____ TELEPHONE #: _____

ADDRESS: _____
(Address) (Street) (Apt. #) (Borough) (Zip Code)

Other source on Income \$ _____ Weekly Bi-weekly Monthly Bi-monthly (Circle one) _____

BANK & CREDIT REFERENCES

BANK NAME	ADDRESS	TYPE OF ACCT (Savings, checking, etc...)	ACCOUNT NUMBER	BALANCE \$
				\$
				\$
				\$

HAVE YOU TRANSFERRED, GIFTED OR DISPOSED ANY ASSETS WITHIN THE LAST 2 YEARS ? ____ Yes ____ No

IF YES, PLEASE EXPLAIN: _____

CREDIT REFERENCE: _____

ADDRESS: _____
(Address) (Street) (Apt. #) (Borough) (Zip Code)

CONTACT (name): _____ TELEPHONE #: _____

DEAR APPLICANT/S:

PLEASE NOTE CHANGES TO APPLICATION. ALL INFORMATION REQUESTED ON PAGE 5 (OR 6 IF YOU PREFER THE INFORMATION IN SPANISH), MUST BE SUBMITTED WITH THIS APPLICATION.

BE INFORMED THAT IF YOU ARE APPLYING FOR ANY OF OUR PROGRAM APARTMENTS, THERE WILL BE ADDITIONAL VERIFICATION AND DOCUMENTATION THAT WE WILL REQUIRE.

ESTIMADO APLICANTE:

FAVOR EN NOTAR LOS CAMBIOS DE ESTA APLICACIÓN. TODA LA INFORMACIÓN REQUISITADA EN LA PAGINA 6 (Ó 5 SI PREFIERE LA INFORMACIÓN EN INGLES) DEBE DE SER SOMETIDA CON ESTA APLICACIÓN.

ESTE INFORMADO, QUE SI USTED ESTA APLICANDO PARA ALGUNO DE NUESTROS APARTAMENTOS DE PROGRAMA, HABRA DOCUMENTOS Y VERIFICACIONES ADICIONALES QUE SERAN REQUISITADOS.

*****I certify that I am over 18 years of age. It is agreed that this application is subject to acceptance or rejection at any time by the landlord or his representative at their discretion. I state that the above representations are true.*****

*****I hereby give permission to the landlord or his representative to process credit and criminal reports and verify my employment and residency status. I further understand that a fee will be charged for the credit report. *****

***** Yo certifico de que soy mayor de la edad de 18 años. Estoy de acuerdo de que esta aplicación sera sujeta a ser aceptada ó rechazada en cualquier momento por el casero ó el representante de este a su discreción. Yo declaro que sobre todo, las representaciones que e dado son ciertas.**

*****Yo le doy permiso a el casero ó su representante de procesar reportes de crédito y criminales y de verificar mi estado de empleo y vivienda. Tambien entiendo de que una tarifa de reporte de crédito sera cobrada.*****

- **ALL ADULT APPLICANTS OVER THE AGE OF 18 MUST SIGN THIS APPLICATION**
- **TODOS ADULTOS MAÑORES DE 18 AÑOS DEBEN FIRMAR ESTA APLICACIÓN.**

Applicant's Signature: _____

Date: _____

Co-Applicant's Signature: _____

Date: _____

Co-Applicant's Signature: _____

Date: _____

Co-Applicant's Signature: _____

Date: _____

SUBMISSION REQUIREMENTS

YOUR APPLICATION CANNOT BE PROCESSED WITHOUT COPIES OF THESE DOCUMENTS

1. Last Six (6) pay stubs for all working family members. If you do **NOT** receive pay stubs, you **MUST** provide evidence of verifiable income.
2. Last (2) year's tax return, last (2) year's W-2 form or last (2) year's 1099
3. Last six (6) rent receipts
4. Last two (2) Telephone bills & last (2) Con Edison bills
5. Copy of current lease. If you do not have a lease and are living with a friend/relative, you **MUST** provide a **notarized** statement (it must also be signed by the lease holder and should list the address and apartment number)
6. Photo I.D. for all family members over 18 years of age
7. Copy of all children's Birth Certificates who will be living in the apartment
8. Copy of Social Security Cards for all household members
9. Copy of Section 8 Certificate and package (if applicable)
10. Current Public Assistance budget letter (if applicable)
11. SSA award letter for SSA or SSI benefits (if applicable)
12. School verification for all students
13. Copy of most recent bank statements
14. Money Orders. These are **NON-REFUNDABLE PROCESSING FEES: for credit and criminal reports \$50.00 per adult** (all family members over the age of 18). Money Orders should be made payable to **LEMLE & WOLFF, INC.**

****APPLICANTS ON SECTION 8 DO NOT HAVE TO PAY THE \$50 FEES. *****

******YOUR APPLICATION CANNOT BE PROCESSED IF THE \$50. 00 FEES FOR EACH ADULT IS NOT PAID IN ADVANCE******

**BE REMINDED THAT ALL PAPERWORK SUBMITTED WITH THE APPLICATION
WILL NOT BE RETURNED TO APPLICANT/S.**

REQUISITOS DE SUMISIÓN

****SU APLICACIÓN NO PODRA SER PROCESADA SIN ESTOS DOCUMENTOS****

1. Los ultimos (6) talonarios de pago de cada miembro familiar que trabaja.
2. Los formularios de impuestos W-2 o el 1099 de los dos años anteriores.
3. Los ultimos (6) recibos de pago de renta.
4. Las ultimas (2) facturas de telefono y las ultimas (2) facturas de electricidad.
5. Copia de su contrato de arrendamiento. Si usted no tiene un contrato de arrendamiento y vive con un familiar o amistad, usted **TIENE** que proporcionar una carta de declaración **notarizada**, de la persona nombrada en el contrato de arrendamiento en donde usted esta viviendo.
6. Identificación fotografica para todos lo miembros familiars sobre la edad de 18 anos.
7. Copias de certificado de nacimiento para todos los ninos que van a vivir en el apartamento.
8. Copias de tarjetas de Seguro Social para todos los miembros familiares.
9. Copia de su Certificado de Sección 8 y su paquete (si es aplicable).
10. Carta de presupuesto corriente de Asistencia Publica (si es aplicable).
11. Carta de premio de SSA para sus beneficios de SSA o SSI (si es aplicable).
12. Verificacion para todos estudiantes.
13. Copia de declaraciones de banco de todas sus cuentas.
14. Giro Postale. Esta cuota de procesamiento **NO ES reembolsada: para credito y reportes criminales \$50.00 por cada adulto** (todos miembros de familia sobre la edad de 18). Giro Postale debe de ser echo a: **LEMLE & WOLFE, INC.**

****APLICANTES EN SECCION 8 NO PAGAN ESTAS CUOTAS****

****SU APLICACIÓN NO PODRA SER PROCESADA SI LA CUOTA DE \$50.00
PARA CADA ADULTO NO ESTA PAGADA EN AVANSADO****

**SEA AVISADO QUE TODO LOS PAPELES SUMETIDOS CON LA APLICACION
NO SERAN REGRESADOS A EL APLICANTE.**

CREDIT REPORT RELEASE

I HEREBY AUTHORIZE LEMLE & WOLFF AND ITS AGENT/S, TO OBTAIN MY CREDIT REPORT (WHICH INCLUDES HOUSING, PALS (PREVIOUS ADDRESS LOCATOR SERVICE), AND CRIMINAL BACKGROUND) IN CONNECTION WITH MY RENTAL/SALES APPLICATION.

I HEREBY ADDITIONALLY AUTHORIZE LEMLE & WOLFF AND THEIR AGENT/S TO OBTAIN A SOCIAL SEARCH, NOW OR IN THE FUTURE.

➤ **Applicant Name** _____

Home Address _____

SS # _____ Date of Birth _____

Signature _____ Date _____

➤ **Co-Applicant Name** _____

Home Address _____

SS # _____ Date of Birth _____

Signature _____ Date _____

➤ **Co-Applicant Name** _____

Home Address _____

SS # _____ Date of Birth _____

Signature _____ Date _____

➤ **THE SIGNATURE OF EACH LEASE ADULT APPLICANT IS REQUIRED**