

TINAJ
REAL ESTATE
Managing Agent

Tel: 914-316-0263 | **Email:** TinajRealEstate@gmail.com | **Web:** www.TinajRealEstate.com

LETTER OF AUTHORIZATION

I / We, _____ | _____
Applicant *Co-Applicant*

agree that by signing below, I /we hereby authorize Tinaj Real Estate to conduct inquiries concerning my income, credit, residence, family composition, character, reputation, and to verify my current employment, for the purpose of verifying information provided by me on my apartment rental application to the above name company. This also gives Tinaj Real Estate permission to verify income, credit and family composition any time during their lease or if in default anytime thereafter.

THE FOLLOWING INFORMATION MUST BE SUBMITTED WITH YOUR APPLICATION OR WE WILL NOT BE ABLE TO PROCESS YOUR APPLICATION, AS IT WILL BE INCOMPLETE:

1. Copy of your last year's Tax Returns (W-2 Form) only the 1st page is required
2. Copies of your last three (3) to four (4) pay stubs
3. Five (5) months of your most recent rent receipts
4. Copy of a valid Picture ID, example: *Drivers License or Alien Card or Passport*
5. Copy of your Social Security Card
6. Letter from your current employer

I/ We declare that the statements contained in this application are true and correct; if any information is found to be false, any lease, which may be subsequently executed, may be declared null and void by the landlord. Applicant understands that only the landlord may rent the apartment, and that the landlord does not discriminate because of race, religion, age or sex. Landlord complies with Fair Housing Rules.

Please be advised, by your submission of application to rent an apartment, you are hereby agreeing to pay a **NON-REFUNDABLE APPLICATION FEE OF \$65.00 PER EACH ADULT ON THE APPLICATION IN THE FORM OF A CASH OR MONEY ORDER.**

X _____
Signature of Applicant

X _____
Signature of Co-Applicant

Date: _____

Date: _____

We are NOT permitted to provide you with a copy of your credit report, as it is for office use ONLY, and as set forth by the credit bureaus and federal statutes. You may retain a copy directly from TransUnion at 800-916-8000 or www.transunion.com

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RENTAL APPLICATION

Apartment/Unit No.: _____ Address: _____
Monthly Rent: \$ _____ Proposed Occupancy Date: _____

1. Applicant Name: _____ Tel. No. (____) _____ - _____
Social Security # _____ - _____ - _____ Date of Birth ____/____/____
Current Address _____ City _____, State ____ Zip _____
Previous Address _____ City _____, State ____ Zip _____
Employer _____ Address _____
Tel. No. (____) _____ - _____ Annual Income \$ _____ Position _____
2. Applicant Name: _____ Tel. No. (____) _____ - _____
Social Security # _____ - _____ - _____ Date of Birth ____/____/____
Current Address _____ City _____, State ____ Zip _____
Previous Address _____ City _____, State ____ Zip _____
Employer _____ Address _____
Tel. No. (____) _____ - _____ Annual Income \$ _____ Position _____

3. List All OTHER Occupants That Will Be Living in the Apartment (along with applicant):

Name	Relationship	SS #	Date of Birth

4. In case of an emergency, list name, address & tel # of nearest relative _____
Address _____ Tel. No. (____) _____ - _____
5. Bank Name _____ Branch _____
Checking Account # _____ Saving Account # _____
6. Business Reference: Name _____ Tel. No. (____) _____ - _____
Address _____ City _____, State ____ Zip _____

THIS IS NOT A LEASE AND CONFERS NO RIGHT TO TENANCY OR OCCUPANCY. IF THIS APPLICATION IS ACCEPTED, THE APPLICANT AND CO-APPLICANT WILL ENTER INTO A WRITTEN LEASE, TO BE PREPARED BY THE LANDLORD OR IT'S AGENT. UPON SIGNING THE LEASE, THE APPLICANT(S) WILL BE REQUIRED TO PAY THE FISRT RENT INSTALLEMNT IN ADVANCE, ALONG WITH THE ONE (1) MONTH REQUIRED SECURITYDEPOSIT, EQUAL TO TWO (2) RENT INSTALLMENTS.

X _____
Applicant Signature

X _____
Co-Applicant Signature

Date: _____

Date: _____