

C.J. LOMBARDO REAL ESTATE COMPANY

LICENSED REAL ESTATE BROKER

335 MAIN STREET • HACKENSACK, NJ 07601 • (201) 488-2550 • FAX (201) 488-7419

www.rentthisapartment.com

FIRST TENANT

1. FULL NAME _____
First Middle Initial Last Jr. or Sr.
PRESENT ADDRESS _____
Street and Apt# City State Zip
HOW LONG AT PRESENT ADDRESS _____ CURRENT RENT _____ PHONE _____
LANDLORD NAME _____ ADDRESS _____ LL PHONE _____
PREVIOUS ADDRESS _____
Street and Apt# City State Zip
DATE OF BIRTH _____ SOCIAL SECURITY # _____
NAME OF EMPLOYER _____
ADDRESS OF EMPLOYER _____
YEARS EMPLOYED _____ SALARY _____ POSITION _____
NAME OF SUPERVISOR _____ JOB PHONE _____
2ND JOB OR ADDITIONAL INCOME _____ 2ND JOB PHONE _____
BANK NAME _____ ACCOUNT # _____ TYPE OF ACCOUNT
 SAVINGS CHECKING
DRIVERS LICENSE # _____ STATE ISSUED _____

SECOND APPLICANT OR SPOUSE IF ANY

2. FULL NAME _____
First Middle Initial Last Jr. or Sr.
PRESENT ADDRESS _____
Street and Apt# City State Zip
HOW LONG AT PRESENT ADDRESS _____ CURRENT RENT _____ PHONE _____
LANDLORD NAME _____ ADDRESS _____ LL PHONE _____
PREVIOUS ADDRESS _____
Street and Apt# City State Zip
DATE OF BIRTH _____ SOCIAL SECURITY # _____
NAME OF EMPLOYER _____
ADDRESS OF EMPLOYER _____
YEARS EMPLOYED _____ SALARY _____ POSITION _____
NAME OF SUPERVISOR _____ JOB PHONE _____
2ND JOB OR ADDITIONAL INCOME _____ 2ND JOB PHONE _____
BANK NAME _____ ACCOUNT # _____ TYPE OF ACCOUNT
 SAVINGS CHECKING
TOTAL NUMBER OF PEOPLE WHO WILL OCCUPY APT. _____ (PLEASE LIST NAME(S) BELOW)
1. _____ DATE OF BIRTH _____ 2. _____ DATE OF BIRTH _____
3. _____ DATE OF BIRTH _____ 4. _____ DATE OF BIRTH _____
DO YOU HAVE A PET? YES NO DESCRIPTION _____
HOW DID YOU FIND US? _____ REASON FOR MOVING _____
AUTO: MAKE / YEAR _____ D.L. NO. _____ STATE _____ PLATE # _____

The undersigned hereby agrees for rental of the dwelling unit described herein and represents the facts contained are true. Any false information given will be grounds for immediate rejection of this application, forfeiture of deposit monies, and possible future eviction. Only persons listed on this application may occupy the apartment. Any person over 18 years old is required to have a credit check completed. I also understand that this application is subject to the approval of the landlord, who I/We authorize to verify all information on the rental application by all means, including consumer reporting agencies, public records, current and previous rental property owners, employers and personal references. The **NON-REFUNDABLE** fee for the credit check is \$35.00 per person which must be paid at the time this application is completed. In addition, Applicant must pay a minimum \$100.00 as a deposit toward the entire balance prior to this application being processed. ONLY MONEY ORDERS, CERTIFIED OR CASHIERS CHECK WILL BE ACCEPTED. If the application is not accepted, the entire deposit minus the credit check(s) will be returned to the Applicant. IF APPLICATION IS ACCEPTED, THE BALANCE OF THE FIRST MONTH'S RENT IS DUE WITHIN THREE (3) DAYS OF ACCEPTANCE OR THE APARTMENT WILL BE PUT BACK ON THE MARKET AND DEPOSIT MONEY WILL BE FORFEITED. ALL MONIES DUE ON APARTMENT MUST BE PAID PRIOR TO MOVE-IN DATE. IF APPLICATION IS PROCESSED AND APPROVED BY LANDLORD, AND THE APPLICANT DECIDES NOT TO RENT THE APARTMENT FOR ANY REASON, ALL DEPOSIT MONEY, WITH EXCEPTION OF THE SECURITY DEPOSIT, IS NON-REFUNDABLE. Denied Applicants may obtain a copy of their credit report by requesting same in writing. Broker's commission, if applicable, is considered earned and is due and payable once the application is approved by Landlord.

BLDG. _____	RENT _____	SIGNATURE _____
RENT _____	SEC _____	
APT.# _____	APPL. FEE _____	SIGNATURE _____
BEGINNING _____	R.E. FEE _____	
	TOTAL _____	DATE _____
	DEPOSIT _____	
	BAL. DUE _____	WITNESS _____