ADDRESS:

## URBAN REAL ESTATE OF NEW YORK, LLC

RENT:

## **APPLICATION FOR RENTAL**

SIZE:

UNIT:

41 Union Square West, Suite 325 New York, NY 10003 Phone: (212) 842-9060 Fax: (408) 608-2030

DATE:

APPLICANT INFORMATION							
FIRST NAME	M.I.	LAST NAME		JR./SR.	DATE OF BIRTH	SSN	
HOME PHONE	WORK PHONE		CELL PHONE		EMAIL	- I	
( )	( )		( )				
CURRENT ADDRES	S						
STREET ADDRESS			CITY		STATE	ZIP	
LANDLORD/MANAGING AGENT NAME			LANDLORD/MANAGING		SING AGENT PH	ONE	
MONTHLY RENT	DATE IN		DATE OUT		REASON FOR LEAVING		
PREVIOUS ADDRES	SS (if less t	han 2 years	at current	t)			
STREET ADDRESS			CITY		STATE ZIP		
LANDLORD/MANAGING AGENT NA	ME				LANDLORD/MANAG	SING AGENT PH	ONE
			(		( )	( )	
MONTHLY RENT	DATE IN		DATE OUT	DATE OUT REASON F		LEAVING	
BANK INFORMATION	)N						
CHECKING ACCOUNT BANK NAME			ACCOUNT NUMBER				PHONE NUMBER
							( )
SAVINGS ACCOUNT BANK NAME			ACCOUNT NUMBER				PHONE NUMBER
							( )
OTHER ACCOUNT BANK NAME			ACCOUNT NUMBER				PHONE NUMBER
							( )
EMPLOYMENT & IN	ICOME INF	ORMATIO	N				
PRESENT EMPLOYER/COMPANY			OCCUPATION				ANNUAL SALARY
SUPERVISOR NAME			SUPERVISOR P	HONE			START DATE
			( )				
PREVIOUS EMPLOYER/COMPANY			OCCUPATION				ANNUAL SALARY
SUPERVISOR NAME			SUPERVISOR P	HONE			START DATE
			( )				
OTHER INCOME DESCRIPTION			l				ANNUAL INCOME
BUSINESS/PERSON	NAL REFER	RENCES					
NAME		ADDRESS			PHONE		RELATIONSHIP
					( )		
NAME ADDRESS				PHONE		RELATIONSHIP	
			( )				
CO-APPLICANT INFORMATION (if applicable)							•
FIRST NAME	M.I.	LAST NAME		JR./SR.	DATE OF BIRTH	SSN	
HOME PHONE	WORK PHONE	CELL PHONE			EMAIL		
( )	( )		( )				





CO-APPLICANT BA	NK INFORMATION (i	f applicab	ole)				
CHECKING ACCOUNT BANK NAME	ACCOUNT NUMBER				PHONE NUMBER		
				( )			
SAVINGS ACCOUNT BANK NAME		ACCOUNT N	UMBER		PHONE NUMBER		
					( )		
OTHER ACCOUNT BANK NAME	ACCOUNT N	UMBER		PHONE NUMBER			
					( )		
CO-APPLICANT EMPLOYMENT & INCOME INFORMATION (if applicable)							
PRESENT EMPLOYER/COMPANY		OCCUPATION				ANNUAL SALARY	
SUPERVISOR NAME	SUPERVISOR PHONE				START DATE		
		( )					
PREVIOUS EMPLOYER/COMPANY		OCCUPATION	N		ANNUAL SALARY		
SUPERVISOR NAME		SUPERVISOR	R PHONE			START DATE	
		( )					
OTHER INCOME DESCRIPTION						ANNUAL INCOME	
OO ADDI IOANIT OI	IDDENIT ADDDESO ("	. 1. 1	1.				
	IRRENT ADDRESS (if		ie)				
STREET ADDRESS		CITY		STATE	ZIP		
LANDLORD/MANAGING AGENT NA	AME		LANDLORD/MANAGING AGENT			IONE	
					( )		
MONTHLY RENT	DATE IN	DATE OUT		REASON FOR LEA	AVING		
OTHERS WHO WIL	L OCCUPY THE APA	RTMENT					
NAME		RELATIONSHIP				AGE	
NAME		RELATIONSHIP	RELATIONSHIP		AGE		
EMERGENCY CON	TACT						
NAME	ADDRESS		PHONE			RELATIONSHIP	
			( )				
PETS							
PETS?	DESCRIPTION						
□YES □NO							
HOW DID YOU FIND	US?						
I warrant that all statements above set forth are true. I hereby give my permission to communicate with my current and former landlord for the							
purpose of discussing any facts and circumstances of my current or former tenancy, as well as the other information listed above. I give my permission to communicate with my current employer(s) for the purpose of verifying the information listed above. I understand there are no							
limitations or restrictions regarding what may be discussed or revealed. I am aware that a credit history, OFAC search, and landlord/tenant court							
record search will be done in conjunction with my application. I hereby give my consent to the Landlord to obtain my consumer credit report for the							
purposes of tenant screening through On-Site.com. I understand that I may have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation.							
(Signed/Applicant)		Date	(Signed/Co-Applican	nt)		Date	





## **NEW YORK CITY TENANT FAIR CHANCE ACT**

Pursuant to federal and state law NYC Admin. Code §20-807 et seq.:

- 1) If your application is denied or other adverse action is taken against you due to a screening report the landlord uses, the landlord must tell you so and how to contact the screening company to obtain a free copy of the report.
- 2) You may dispute inaccurate or incorrect information on the report directly with the screening company.
  Our screening company is: On-Site.com, 307 Orchard City Drive, Suite 110, Campbell, CA 95008, (877) 222-0384 | Fax: (888) 774-0144 | <a href="https://www.RenterRelations.com">www.RenterRelations.com</a>
- 3) Annually, you may order a free screening report from <a href="www.annualcreditreport.com">www.annualcreditreport.com</a> (in addition to a free report from each national consumer reporting agency if adverse action was taken against you).







## **AUTHORIZATION TO RELEASE RECORDS**

FAX TO: 877 FAX ON-SITE (877-329-6674)

I authorize the below parties to verify any and all requested information and to provide written support as necessary to On-Site.com.							
(PRINT Applicant Name)	(Applicant Signature)	 Date					



