



RESIDENTIAL LEASE APPLICATION

155 West 21st Street, NY, NY 10011

CASA155W21.COM

P: 212 929-2121 F: 212-633-4353

DATE:

CONSULTANT:

APT NO. _____ APT. TYPE _____ MONTHLY RENT \$ _____ SECURITY \$ _____

REQUESTED LEASE START DATE _____ LEASE TERM 1 year 2 year

NAME OF APPLICANT (Leaseholder, Occupant or Guarantor)

Name	Social Security No.	1 <input type="checkbox"/> Prospective Tenant/Leaseholder
Phone (h)	(o)	(email)
		2 <input type="checkbox"/> Guarantor
		3 <input type="checkbox"/> Occupant/Roommate

Occupants	Relationship

IN CASE OF EMERGENCY -- NOTIFY

Name	Address	City/State	Phone	Relationship
			()	

If Guarantor Application, describe relationship to Applicant: _____

Names of others who will live in Apartment (but will not be on Lease): _____

Names and ages of visiting children: _____

Are you applying for consent to have a pet? no yes Describe (include weight) _____

Note: Maximum permitted 2 pets in the apartment at any one time.

Have you ever been evicted? no yes

Have you ever broken a lease? no yes Describe: _____

Have you ever been in Landlord/Tenant court? no yes Describe: _____

Have you ever declared bankruptcy? no yes Explain: _____

Have you ever rented from Lalezarian Developers Inc.? no yes When? _ Building _____ Apt # _____

Citizen Status: U.S. Citizen Permanent Resident (green card) Temporary Resident (no green card)

PRESENT ADDRESS

Street	Apt. No.	City	State	Zip	Phone	Monthly Rent	How Long
					()	\$	

LANDLORD

Name	Address	Phone ()
Reason for Move: __1 st Job __Larger Apt. __Smaller Apt. __Sold __Lease Expired __New Job __Transferee __New Hire		

PREVIOUS ADDRESS

Street	Apt. No.	City	State	Zip	Phone	Monthly Rent	How Long
					()	\$	

PREVIOUS LANDLORD

Name	Address	Phone
		()

EMPLOYMENT

Name of Company (If Student List School Name)	Title/Occupation	Address	City	State	Zip
Type of Employment: __ Financial __ Computer __ Law __ Entrepreneur __ Medicine __ Creative __ Student __ Other					
How Long	Annual Income \$	Supervisor Name/Phone	Bus. Phone (Direct)		
Salary \$	Bonus (if any) \$	Salary 03_____ Bonus03 _____	Salary04_____ Bonus04_____		

Previous Employer (if at present less than 3 yrs.)	Title/Occupation	Address	City	State	Zip
How Long	Annual Income \$	Supervisor Name/Phone	Bus. Phone (Direct)		
Salary \$	Bonus (if any) \$	()			

BANKING INFO

Savings Bank	Address	Account #	Account in Name of
Checking	Address	Account #	Account in Name of

Note: Letter from employer on company letterhead verifying income is required. If self employed, letter from CPA verifying income is required.

OTHER INCOME

Sources	Amounts
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REFERENCES

CPA	Firm	Address	Phone ()
Attorney	Firm	Address	Phone ()

How did you find this apartment?

NY Times Ad Sun Craig's list Website _____ Referral _____ Signs/Billboards
 Broker (list Company & Broker Name) _____

The Landlord will in no event be bound, nor will possession be given, unless and until a lease executed by the landlord has been delivered to the tenant. The applicant and his/her references must be satisfactory to the Landlord.

Halstead Leasing Consultants shall in no event be liable as respects any matter concerning this application, or concerning any act of the Landlord or failure to act on the part of the Landlord in connection with this application, or in connection with any lease or leases contemplated herein. No representations or agreements by agents, brokers or others are binding on the Landlord unless included in the executed lease.

I hereby warrant that all my representations set forth herein are true. I recognize that the truth of the information contained herein is essential. I further represent that I am not renting a room or an apartment under any other name, nor have I ever been dispossessed from any apartment, nor am I now being dispossessed and that I am over 18 years of age.

I have been advised that I have the right to make a written request, directed to the appropriate credit reporting agency, within a reasonable time for a complete and accurate disclosure of the nature and scope of any credit investigation. I understand that upon submission, this application and all documents become the property of the Landlord of Agent, and will not be returned to me under any circumstances.

I authorize the verification of the above referenced information and its release to Landlord and its agents connected with the lease contemplated herein. I authorize Maiden Lane Properties, LLC, Halstead Leasing Consultants and The Credential Researchers, Ltd. and their agents to obtain a consumer credit report on me and to verify any information on this application with regard to my employment history current and prior tenancies and all other information, which the Landlord deems pertinent to my obtaining residency. I will present any other information required by the Landlord in connection with the lease contemplated herein.

I understand that the \$75.00 credit checking fee is non refundable.

 APPLICANT SIGNATURE

 DATE

Payment Options

Applicant(s) Name: _____

Building: _____

Unit: _____

Application #: _____

(for internal use only)

Cash/Money Order

Signature of Client

Date

Signature of Recipient

Date

Amount

Credit Card Please note we do not accept AMEX or Discover cards

Circle one Visa Master card

Credit Card Number:
Name of the Card Holder:
Billing Address of Card:

3 Digit Security Code:
Expiration Date:

Signature

Date

Amount

By my signature, I authorize Credential Researchers LTD. permission to charge this credit card in the amount listed above



140 West End Ave - Suite 17J - NYC, NY 10023
www.credentialresearchers.com

Tel 212-873-8290 / 866-873-8290 toll free
Fax 212-873-2769 / 917-441-6785

AUTHORIZATION TO RELEASE RECORDS

LANDLORD:

TO: _____
(Company Name) (Contact/Title)

(Phone Number) (Fax Number)

EMPLOYER:

TO: _____
(Company Name) (Contact/Title)

(Phone Number) (Fax Number)

BANK:

TO: _____
(Bank Name) (Contact/Title)

(Phone Number) (Fax Number)

ACCOUNTANT: (if applicable i.e. if self-employed or have income in addition to your salary, etc.)

TO: _____
(Name) (Phone)

ATTORNEY: (if applicable)

(Name) (Phone)

I authorize the above referenced individuals and/or institutions to verify any and all requested information and, when necessary, to provide written backup to the Credential Researchers, Ltd.

Applicant Name: _____
(Please Print)

Applicant Signature: _____

Please Note: To expedite your application process, please fill in the above information and advise these parties that The Credential Researchers, Ltd. will be contacting them. Please indicate the importance of a prompt response. Thank you.



155 west 21st street

155 W21st ST

New York, NY 10011

Tel: (212) 929-2121 Fax: (212) 633-4353

www.CASA155W21.com

LEASE APPLICATION PROCESS

Apt # _____ Rent \$ _____ Income Requirements (monthly rent X 40) \$ _____

There is a non-refundable fee of \$75 per applicant for the credit verification process
There is a non-refundable fee of \$85 per applicant for international credit verification
Fax ALL documents concerning your application to: Fax #(212) 633-4353
IF YOUR APPLICATION IS NOT COMPLETED WITHIN 3 BUSINESS DAYS
THE APARTMENT MAY BE PUT BACK ON THE MARKET

DOCUMENTS NEEDED:

A- If you work for a company:

- 1- Employment letter on employer’s letterhead verifying:
 - A: Length of employment
 - B: Annual Income for the past 2 years (include any bonus, rental allowance or other extra income)
- 2- Copy of your most recent pay stub
- 3- If employed less than 2 years, prior W2, tax return or employment letter from your prior employer
- 4- 3 most recent bank statements.
- 5- Letter of reference from your prior landlord or cancelled rent checks for the past 2 months.

B- If you are self employed or commission based:

- 1- Letter from your accountant verifying:
 - A: Length of employment, type of business
 - B: Annual Income for past 2 years
- 2- Copy of your Complete Federal Income tax return for the past 2 years (including all schedules, W2 & 1099 forms)
- 3- 3 most recent bank statements
- 4- Letter of reference from your landlord

C- Guarantor Requirements (at least 80 X monthly rent):

- 1- Income requirement \$ _____
- 2- All items listed in A or B above

D- Corporate Lease with personal Guarantor:

- 1- Copy of an income statement and balance sheet or Annual Report
- 2- Letter of reference from the prior landlord of the occupant or company if the company has previously rented an apartment
- 3- A corporate resolution
- 4- A personal guarantor (see item C above) _____

You will be required to deliver to the Leasing Office two separate certified checks, bank checks or money orders- one for the first month rent and the other for the security deposit. You must also deliver a personal check for \$500.00 which will serve as a move in deposit and will be returned to you after you complete your move in assuming that there are no damages to the lobby, elevator, hallways, etc. attributable to your move into 155 W.21st ST.. Your move in date and time can then be scheduled through the management office. You must bring these checks to the Leasing Office within one (1) business day.

CHECKS PAYABLE TO: 155 W.21st ST. LLC

Rent \$ _____ Security Deposit \$ _____ Move in Deposit \$500.00