

Vertical City Realty, Inc.
1790 Third Avenue, First Floor
New York, New York 10029

Telephone: (212) 289-9600
Fax: (212) 534-3945

Date: _____

LEASE APPLICATION

Leasing Agent: _____ Property Address: _____

Please Print and Complete All Questions, Incomplete Information May Result in Automatic Rejection.

Applicant Information

Name: _____ Social Security _____
First Middle Last

Cellular Phone: _____

Date of Birth: ____/____/____

Home Telephone: _____

Email Address: _____

Marital Status: _____ Spouse's Name _____ Spouse's Social Security _____

Drivers License # _____ State: _____ Current Member of Military Service Y ___ N ___

Name All Other Persons Occupying Apartment – Relationship – D.O.B. – Social Security #

APPLICANT RESIDENCY

Present Status (check one) Rent ___ Co-op/Condo ___ Homeowner ___ Other ___

Present Address: _____
Number Street Apt# City State Zip

How Long at this Address: _____ Monthly Rent\$: _____ per month

Present Landlord: _____ Telephone: _____

Previous Address: _____
Number Street Apt# City State Zip

Previous Landlord: _____ Telephone: _____

APPLICANT EMPLOYMENT & INCOME

Are You Currently Employed? Y ___ N ___ Present Employer: _____

Contact Person: _____ Employer's Telephone: _____

Address: _____ How long employed? _____

Position: _____ Monthly Income: _____ Other Income: _____

Source of other income: _____ Total Annual Income: _____

BANK REFERENCES

Bank Name: _____ Address: _____ Acct #: _____

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Bank Name: _____ Address: _____ Acct #: _____

Have applicant, spouse or other potential occupants ever been arrested or indicted for, or convicted of, a felony or misdemeanor? Yes _____ No _____

If yes, please explain: _____

Have applicant, spouse or other potential occupants ever been a party to a landlord/tenant legal action, such as a dispossession for non-payment, late payment, eviction, possession, property damage, etc? Y _____ N _____

If yes, please explain: _____

Have any judgments been entered against applicant, spouse or other potential occupants? Y _____ N _____

If yes, please explain: _____

In case of emergency, please contact: _____

Address: _____ Phone: (_____) _____

Fair Credit Reporting Act. You agree that we and/or the owner/agent may obtain or use a consumer or an investigative consumer report in connection with this application to lease an apartment. Subsequent similar reports may be requested or utilized in connection with an update, renewal or extension of this application or your lease and for any other legitimate business purpose. Upon request, you will be informed whether a consumer report was obtained, and if such report was obtained, of the name and address of the consumer reporting agency that furnished the report. You agree that we are authorized to obtain consumer reports or investigative reports pertaining to you after you vacate the apartment in order to collect amounts due or for other legitimate business purposes. This credit check is good for two months from the date on this application. After the two month period, applicant must pay for another credit check in order to be approved for another apartment.

I hereby certify that the statements made in this application have been examined by me and are true, correct and complete to the best of my knowledge. I have no objection to the inquiries to be made in the future for the purpose of verifying the facts herein stated or determining the qualifications of my application. I understand that the filing of this application in no way obligates the owner/agent to reserve of lease an apartment to me.

I understand that the \$100 application fee Tenants/Guarantors and store applications is nonrefundable.

Signature of Applicant

Date