

#### LEADER IN HOME BUYING

112-21 JAMAICA AVE., RICHMOND HILL, NY, 11418 PHONE: 718-709-9009 FAX: 718-441-0580

# **RENTAL APPLICATION FORM**

Applican	t Informa	ation					10.					
Last Name:	Last Name:			First Name:				MI:	MI:			
Sex:	Sex: Home Phone Number:			Work Phone Number:				Cell.	Cell. Phone Number:			
Social Security Number:			Driv	Driver's License Number:				State: Date of Birth:				
M - 2- 1 Co	l l c	-ala:	٠,	farried:		- 1	Divorced:		Fian	cá.	, -	
Marital Status		formation		larrieu.			Divorceu.		] Flair			
		Mation		Cia		Chata	7	p Code:		Langth of Doc	danas	
Present Home Address:				City: State:				p code:		Length of Residence:		
Landlord Name:				Landlord Phone Number: Land				ndlord Fax Number:		Monthly Rent:		
Reason for M	oving:											
						*						
and the second second		nformation				,						
Previous Hon	Previous Home Address:			City:			State: Zip			Length of Residence:		
Landlord Nan	ne:		La	ndlord Phone	Number:		Landlord	l Fax Numb	er:	Monthly Ren	it:	
Reason for Me	oving:											
Employm	ent Info	rmation										
Present Occup	Employ	yer Name: Nam				ne of Supervisor:						
•								•				
Employer	- Human Res	sources Dept. Phone	#:	Employer	– Human Re	sources I	Dept. Fax #	Supe	rvisor Ph	one Number:		
Current Incom	ne			Check one:		Lei	ngth of Emp	loyment:	w	ork Hours:		
After Deduction	ons:	Weekly	Bi-We	ekly Mon	thly Year	ly				AM	PM	
2 <sup>nd</sup> Job Er	nployme	nt Informatio	n									
Present Occupation: Empl				oyer Name: Nam				ne of Supe	e of Supervisor:			
Employer –	Human Reso	urces Dept. Phone #	t:	Employer -	Human Reso	urces De	pt. Fax #:	Superv	visor Pho	ne Number:		
Current Income (				Check one: Length of Emp				loyment:	W	ork Hours:		
After Deduction	er Deductions: Weekly Bi-Weekly Monthly Yearly  AM					PM						
Other Sou	irces of I	ncome:										
SSI		Food Stamps			Child Supp			(	Other Plea	ase Describe:		
Per Month:		Per Month:			Per Month	:		1				

In Case of Emergency, Conta	act:							
Name:	Phor	ne #:		City:	State:	Relationship:		
Name: Phone #:				City:	State:	Relationship:		
Rental Assistance	<u> </u>							
Rental Assistance / Subsidy Type:	Voucher A	imount:			Expiration Date:			
Case Number:		Case Work	ker Name:			Case Worker Phone Number:		
Residency Information								
HOW MANY OCCUPANTS WILL BE LIVING. IN THIS APT BESIDES APPLICANT SIGNED ON THIS LEASE PLEASE LIST ALL:		APT. OVE	R THE AGE OF	DULT LIVING IN THE 18 YEARS IS REQUIRED RATE APPLICATION:		IF THIS IS NOT FILLED OUT IT INDICATES THAT NO OTHER PE WILL BE LIVING IN THE APT		
Total Adults:	otal Children	Under 18 Yo	ears:		Pets: NO PETS ALLOWED			
FULL NAME			SEX	DATE OF BIRTH	RE	ELATIONSHIP TO APPLICANT		
				·				
••								
Have you ever:	C1 - 1				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Filed for bankruptcy? If yes, list date								
Been served an eviction notice or be					yes, when	?		
Willfully or intentionally refused to			? If yes, wh	en?				
Been sued for unlawful detainer? If		1000						
Been convicted of or committed a fe	_				-			
Been charged or arrested for drug p	ossessio	n or sale?						
						□ Other		
I hereby deposit with the management of understand that my rent deposit may be the application is approved and I'm unablif this application is not approved proviously. I hereby consent to allow, through criminal and public records information lease an apartment, and its agent shall occupancy history for account review plisted in this application is true and corresponding to the same corresponding to the s	applied to fulfiling that a its designous for the part have a curposes act.	to any rent lo  If the condition  If above que  If above q	oss, re-renta ions of occup estion was a and its emp letermining right to revie roving applic	I fee etc. If I don't brin pancy, my deposit will nswered truthfully. All loyees, to obtain and whether or not to leas www. my consumer info	g the rest of not be returned m returned m verify my co e to me an a rmation, relate under person of the control of the contro	the deposit by:/_/ med. The deposit will only be ret oneys would be returned with a onsumer information (including a partment. I understand that sh		
Remarks or personal statement pleas	se write	here:						
FAILURE TO FILL OUT THE A	APPLICAT	ION COMPL	ETELY WILL	RESULT IN A DELAY O	F PROCESSI	NG YOUR APPLICATION		
		RENTAL A	ADDRESS -	OFFICE USE ONLY				
Rental Property Address:			Apt. #:	Bedroom:	City:	State:		
Interviewed By:		Today	's Date:	Move i	n Date:	Rent/Month:		



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### Credit Authorization Form

Privacy Act Notice: This information is to be used by the agency collecting it or its assignees in determining whether you qualify as a prospective mortgagor under its program. It will not be disclosed outside the agency except as required and permitted by law. You do not have to provide this information, but if you do not your application for approval as a prospective mortgagor or borrower may be delayed or rejected. The information requested in this form is authorized by Title 38, USC, Chapter 37 (if VA); by 12 USC, Section 1701 et. seq. (if HUD/FHA); by 42 USC, Section 1452b (if HUD/CPD); and Title 42 USC, 1471 et. seq., or 7 USC, 1921 et. seq. (if USDA/FmHA). Part I - General Information 1. Name 2. Name and address of Lender/Broker 4. Social Security Number 5. Address 3. Date of Birth Part II - Borrower Authorization I hereby authorize the Lender/Broker to verify my past and present employment earnings records, bank accounts, stock holdings, and any other asset balances that are needed to process my mortgage loan application. I further authorize the Lender/Broker to order a consumer credit report and verify other credit information, including past and present mortgage and landlord references. It is understood that a copy of this form will also serve as authorization. The information the Lender/Broker obtains is only to be used in the processing of my application for a mortgage loan. Borrower Date Notes: Please sign below to authorize credit check\* Authorization is hereby granted to InstaHomes Realty LLC to obtain a standard factual data credit report though a credit reporting agency chosen by InstaHomes Realty LLC. My signature below authorizes the release to the credit reporting agency a copy of my credit application, and authorizes the credit reporting agency to obtain information regarding my employment, savings accounts and outstanding credit accounts (mortgages, auto loans, personal loans, charge cards, credit unions, etc.). Authorization is further granted to the reporting agency to use a photo static reproduction of this authorization if necessary to obtain any information regarding the above mentioned information. **Applicant Signature Co-Applicant Signature** 



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# **List of Documentation Needed for Rental Application: Income/Asset Documents:**

- 1. Most recent (1) month's pay stubs (required): If you are paid biweekly then submit the 2 most recent. If you are paid weekly, then 4 most recent paystubs.
- 2. (2) Most recent monthly bank statements) (optional): Bank statements are optional but definitely recommended if you have a substantial amount of funds available. This shows stability in case of a financial emergency. If you choose to provide bank statement(s) and your paycheck is directly deposited and shows on your bank statement(s) then item #1 is not necessary.
- 3. (2) most recent annual W2 forms for all jobs (**required**): This shows a history of income and helps a landlord ascertain if you are consistent with employment income.
- 4. (2) most recent full tax returns (**optional**): Please be prepared that some landlords require full tax returns. You may submit these to prevent them from being requested later in the application process. \*\*\*\*\*IF APPLICANT IS SELF EMPLOYED FULL COMPANY TAX RETURNS ARE REQUIRED\*\*\*\*\*
- Most Recent Retirement Account Statements) (**optional**): this is optional but definitely recommended if you have anything substantial in your retirement fund as it shows some stability in case of a financial emergency.

Identification Documents: 1. Picture ID (required): Driver's License is 1st preference to fulfill this requirement.