



NEW JERSEY ASSOCIATION OF REALTORS® STANDARD FORM OF LEASE APPLICATION



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LEGAL NAME OF APPLICANT						DATE OF APPLICATION
PRESENT ADDRESS						HOME PHONE NUMBER
DATE OF BIRTH	OCCUPATION				YEARLY INCOME	
EMPLOYER				EMPLOYER ADDRESS		
LENGTH OF EMPLOYMENT	EMPLOYMENT VERIFICATION DEPT. NO.		PRESENT LANDLORD		LANDLORD BUS. PHONE NO.	
PRESENT RENT	HOW LONG A TENANT	LEASE EXPI	RATION DATE	IN CASE OF EMERGENCY N	IOTIFY (NAME AND PHONE	NO.)
LEGAL NAME OF CO-APPLICANT						
PRESENT ADDRESS						
DATE OF BIRTH	OCCUPATION					YEARLY INCOME
EMPLOYER				EMPLOYER ADDRESS		
LENGTH OF EMPLOYMENT	EMPLOYMENT VERIFICATION DEPT. NO.			PRESENT LANDLORD		LANDLORD BUS. PHONE NO.
PRESENT RENT	HOW LONG A TENANT LEASE EXPIRATION DATE		IN CASE OF EMERGENCY NOTIFY (NAME AND PHONE NO.)			
APPLICANTS INTEND TO USE THE LEASED PREMIS	ES AS FOLLOWS:					
AUTO LIC. PLATE - APPLICANT				AUTO LIC. PLATE - CO-APP	LICANT	
ANY PETS? IF YES, WHAT KIND				HOW MANY	SIZE	
YES NO					I	
	APPLICANT'S	S REFERE	NCES (OTH	IER THAN RELATIV	/ES)	
NAME 1		ADDRESS		PHONE NO.		
2						
3						
	CO-APPLICAN	T'S REFE	RENCES (O	THER THAN RELAT	IVES)	
NAME			ADDRESS		·	PHONE NO.
1						
2						
3						

BANK REFERENCES - APPLICA	ANT	BANK REFERENCES	- GG-APPLIGANI
CHECKING (NAME OF BANK & ACCOUNT NO.)	CHE	ECKING (NAME OF BANK & ACCOUNT NO.)
SAVINGS (NAME OF BANK & ACCOUNT NO.)		/INGS (NAME OF BANK & ACCOUNT NO.)	
OTHER (CREDIT CARDS)	отн	HER (CREDIT CARDS)	
/ILL APPLICANT'S EMPLOYER BE RESPONS	IBLE FOR PAYMENT OF RENT?	YES NO	
	PROPERTY FOR WHICH THIS	S IS AN APPLICATION	
ADDRESS			
ADDRESS			
LANDLORD			PHONE NUMBER
ADDITIONAL INFORMATION			
Landlord acknowledges receipt of this I accept or reject the application.	Lease Application on	, 20	The Landlord reserves the right to
Brokerage fee to be paid by:	☐ LANDLORD	☐ TENANT	
Rental Application Fee: By signing th	is Lease Application, applicar	nt(s) agree to pay \$	·
Security Deposit Due By:			
Lease Deposit in the Amount of: \$_			
Applicants for tenancy for a Conc provided by New Jersey law:	lominium/Co-operative unit	generally must be provid	led with the following statement a
THIS BUILDING IS BEING CON			
BE TERMINATED UPON 60 DAYS NO OCCUPY IT. IF YOU MOVE OUT AS			
FAILS TO COMPLETE THE SALE, TH			
I/We hereby warrant that all repr			
I/We direct persons named in this I/We hereby waive all rights of act			
I/We hereby authorize and gran			
\$ for cost of process.			
I/We hereby authorize the below I	The attached Information F	Release Form should be fo	or such credit inquiries.
	named real estate firm to pro	ovide the information ob	tained from such credit bureau to
the landlord. I/We acknowledge receipt of the C	named real estate firm to pro	ovide the information ob	tained from such credit bureau t

APPLICANT	CO-APPLICANT
LeConte Realty	
Brokerage Firm	Agent Please Print Agent's Name
200 Boulevard, Hasbrouck Heights, NJ 07604	(0) 201-288-2000 (F) 800-288-2823
Address	Phone Number