



9201 4th Avenue, Brooklyn, NY 11209
Office: 718.954.8400 Fax: 347.517.4448

Apt needed by: _____ Rent Range: _____ Today's Date: _____

Size (Circle One): ☐ Studio ☐ 1-Bedroom ☐ 2-Bedroom ☐ 3-Bedroom ☐ 4+Bedroom Pets (Y or N): _____

Name: _____ Cell Phone: _____

Email: _____ Work Phone: _____

Current Address: _____

Years There: _____ Rent: \$ _____ Reason for Leaving? : _____

Landlord Name: _____ Landlord Tel: _____

Employer Name & Address: _____

Job Title: _____ Income: _____ How long: _____

Co-Applicant: _____ Cell Phone: _____

Email: _____ Work Phone: _____

Current Address: _____

Years There: _____ Rent: \$ _____ Reason for Leaving? : _____

Landlord Name: _____ Landlord Tel: _____

Employer Name & Address: _____

Job Title: _____ Income: _____ How long: _____

How did you hear about us? _____

I understand and agree that I shall pay the above BROKER(s) the following fee upon signing of the lease for any apartment presented to me by the Brokers(s) or their representatives: I accept a minimum of 1 month's rent to a maximum of 15% to the annual rent for any apartments. Should legal action be needed to collect a fee, I agree to pay the cost.

Applicant

Co-Applicant

Apartments Shown: _____