



APPLICATION FOR LEASE

(Please Print)

Application is made individually, or jointly and severally, by the applicant(s), to lease property in the Woodcliff Community as follows: Type: _____ for _____ year(s), with a desired move-in date of _____, 20____ for the monthly rent of \$ _____

APPLICANT

_____ (First) _____ (Middle) _____ (Last) _____ Date of Birth _____

Male Female Marital Status (optional): _____ Maiden Name: _____

Social Security No. _____ Driver's License No. _____ State _____

Where can you be reached prior to the lease term? Daytime: (____) _____ Evening: (____) _____

Are you a member of Armed Forces? Yes No Rank/Branch _____ / _____ Length of Service _____

PRESENT ADDRESS

Address _____

How long? _____ Rent or Own? _____ Monthly Payment _____

Landlord's Name _____

Landlord's Phone (____) _____

Reason for moving _____

PRESENT EMPLOYMENT Full-Time Part-Time Self Employed

Company _____

Address _____

How long? _____ Position _____

Annual Salary \$ _____ No. Hours/Week _____

Supervisor's Name/Title _____ / _____

Phone No. (____) _____ Ext. _____

PREVIOUS ADDRESS

Address _____

How long? _____ Rent or Own? _____ Monthly Payment _____

Landlord's Name _____

Landlord's Phone (____) _____

Reason for moving _____

PREVIOUS EMPLOYMENT Full-Time Part-Time Self Employed

Company _____

Address _____

How long? _____ Position _____

Annual Salary \$ _____ No. Hours/Week _____

Supervisor's Name/Title _____ / _____

Phone No. (____) _____ Ext. _____

OTHER INCOME Base Allowance for Housing: _____ Child Support: _____ Alimony: _____

Interest & Dividends: _____ Unemployment: _____ Gov't Housing Assistance: _____ Other: _____

BANK REFERENCES

Bank _____ Acct. No. _____ Type of Account _____ Balance _____

Bank _____ Acct. No. _____ Type of Account _____ Balance _____

CREDIT CARD REFERENCES

Name _____

Type of Card _____

Acct No. _____

Name _____

Type of Card _____

Acct No. _____

OTHER CREDIT REFERENCES (Local if possible)

Name _____ Acct. No. _____

Address _____

_____ Zip _____

Name _____ Acct. No. _____

Address _____

_____ Zip _____

MONTHLY PAYMENTS

(Include Mortgage Payments, Automobile, Alimony, Dependent Support, Taxes, Garnishment etc.)

To: _____ Amount \$ _____ Balance _____

To: _____ Amount \$ _____ Balance _____

To: _____ Amount \$ _____ Balance _____

PERSONAL REFERENCE

Name _____

Phone No. (____) _____

Address _____

IN CASE OF EMERGENCY, NOTIFY (not an occupant)

Name _____ Relationship _____

Phone No. (____) _____

Address _____

Have you ever filed for bankruptcy? (circle one) Yes No Date filed _____ Date Granted _____ State _____

Have you ever been evicted or had judgment issued against you? (circle one) Yes No

Are there any outstanding judgements against you? (circle one) Yes No

Have you had property foreclosed upon or given Title or Deed in Lieu thereof in past 7 years?(circle one) Yes No

Are you party to a lawsuit? (circle one) Yes No

Are you obligated to pay alimony, child support or separate maintenance? (circle one) Yes No

Are you a co-maker or endorser on a note? (circle one) Yes No

If you answered yes to any of the above, please explain _____



OTHER OCCUPANT(S) (EACH ADULT OCCUPANT (over the age of 18) MUST COMPLETE AN APPLICATION FOR LEASE FORM)

First, Middle, Last Name	Date of Birth	Gender	Relationship
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PETS (List ALL pets that will reside in the property)

Do you have any pets? (circle one) YES NO Total number of pets: _____

Type/Breed: _____ / _____ Size/Weight: _____ Neutered? _____
 Color: _____ Name: _____ Age: _____ Sex: _____

Type/Breed: _____ / _____ Size/Weight: _____ Neutered? _____
 Color: _____ Name: _____ Age: _____ Sex: _____

AUTOMOBILES (List all vehicles that will be parked on the property)

Make	Model	Year	Color	License No.	State
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

OTHER

Do any occupants own, or plan to purchase, an aquarium? (circle one) YES NO If yes, what size (gallons)?: _____

It is understood the premises are to be used as a residential dwelling occupied by not more than _____ person(s); and that occupancy is contingent upon availability of unit and property being vacated by present occupant. A Deposit in the sum of \$_____ plus an Application Fee in the sum of \$_____ is made herewith, with a clear understanding that this application, including each prospective occupant, is subject to approval and acceptance by the Landlord/Owner/Agent. If this application is not approved and accepted by the Landlord/Owner/Agent, the deposit will be refunded. The Application Fee is a NON-REFUNDABLE fee for processing this Application and will not be returned regardless of lease approval. **IF THIS APPLICATION IS APPROVED, THE APPLICANT MUST EXECUTE A LEASE WITHIN FIVE (5) DAYS OTHERWISE APPLICANT WILL BE LIABLE FOR DAMAGES.** Damages shall be the greater of (a) the amount of the earnest money deposit or (b) the amount of lost rental income + agents commission + advertising costs + other actual costs. All personal property placed in said premises shall be at tenant's risk and tenant shall insure same.

Applicant(s) represent that the premises shall not be used for any illegal or restricted purpose(s) and hereby certify that the information given in the Application for Lease is true, correct and complete to the best of my/our knowledge.

Applicant(s) hereby authorize the person or firm to whom this Application is made, any credit bureau or other investigative agency employed by such person, to investigate the references herein listed or statements or other data obtained from me/us or from any other person pertaining to my/our credit and financial responsibility. Applicant(s) understand that should they enter into a lease, this firm and its designated agents and employees will have a continuing right to review credit information (including inquires to credit bureaus), rental application, payment history and occupancy history for account review purposes, and/or for improving application methods and/or as they relate to my/our tenancy and to future rent collections.

If Applicant(s) is/are self-employed, attach Photostats for past two years of: Individual U.S. Tax Form 1040, and Self-employment U.S. Tax Schedule C
 If Applicant(s) is/are paid on an hourly or weekly basis, attach a photocopy of form W-2 for the past two years.

Applicants must attach a photocopy of driver's license or other form of picture id (i.e. passport, military id, etc.).

IT SHALL BE UNLAWFUL DISCRIMINATORY HOUSING PRACTICE TO DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, ELDERLINESS, FAMILIAL STATUS OR HANDICAP

APPLICANT(S) ACKNOWLEDGE RECEIPT OF COPY OF THIS APPLICATION

THIS IS A LEGALLY BINDING DOCUMENT. READ IN ITS ENTIRETY BEFORE SIGNING. IF NOT UNDERSTOOD, PLEASE SEEK LEGAL ADVICE.

_____/_____
 DATE APPLICANT SIGNATURE PRINTED NAME