



2622 Adam Clayton Powell Blvd, New York, NY 10039
Office: (212) – 510 – 8418 | Email: miriamrealtyinc@gmail.com

LEASE APPLICATION FORM:

Date: _____

Desired Move-In Date: _____

Apartment: _____

Type of Unit Applying for (Circle one): Studio 1BR 2BR 3BR

APPLICANT INFORMATION:

Legal Full Name: _____ Cellphone #: _____

Social Security No: _____ D.O.B: _____

Driver’s License No: _____ State Issued: _____

Present Address: _____

Present Rent: _____ How Long a Tenant: _____ Lease Expiration Date: _____

Present Landlord: _____ Telephone: _____

Reason(s) for leaving: _____

Co-Applicant:

Legal Full Name: _____ Cellphone #: _____

Social Security No: _____ D.O.B: _____

Driver’s License No: _____ State Issued: _____

Present Address (If different): _____

Present Rent: _____ How Long a Tenant: _____ Lease Expiration Date: _____

Present Landlord: _____ Telephone: _____

Reason(s) for leaving: _____



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APPLICANT INFORMATION: *(Please list everyone who will be residing with you in the unit)*

Name:	Relationship to you:	D.O.B	S.S.#
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

EMPLOYMENT INFORMATION:

APPLICANT:

Are you currently employed (Circle one)? **YES** **NO**

Employer: _____ Telephone #: _____

Occupation: _____ Length: _____ Salary: _____

Employer Address: _____

Other Income: _____ Total Annual Income: _____

CO-APPLICANT:

Are you currently employed (Circle one)? **YES** **NO**

Employer: _____ Telephone #: _____

Occupation: _____ Length: _____ Salary: _____

Employer Address: _____

Other Income: _____ Total Annual Income: _____

APPLICANT'S REFERENCES		
NANE	ADDRESS	PHONE #:



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APPLICANT'S REFERENCES		
NAME	ADDRESS	PHONE #:

ANY PETS:	IF YES, WHAT KIND:	HOW MANY:	SIZE:
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I/We hereby warrant that all representation set forth above are true. To verify the above statements, I/We direct persons named in this application to give any requested information concerning me/us. I/We hereby waive all rights of action for consequences as a result of such information. I/We hereby authorize and grant permission to Miriam Realty, Inc. (Real Estate firm) or the Landlord of the latter residence to do a credit check and will pay \$ _____ for cost of process. The attached Information Release Form should be for such credit inquiries.

Applicant Initials: _____

I have read and completed the above form. This application is subject to approval by the owners and/or their agents and may without designating cause be disapproved by them, being agreed that any such disapproval shall not be considered a reflection of the applicant. This agreement is to be made part of the lease entered into by the applicant and owner/agent. The truth of the information made herein is essential and if the owner/landlord or its agent deems any answer or statement herein to be false, or misleading, it shall be considered that any lease granted by virtue of this application may be cancelled at their discretion. It is understood that Tenant Applicant(s) cannot take possession of rental unit, until the application is investigated and accepted by the Owner/landlord, and/or it's agent and that the agreed upon commission, first month's rent and security deposit are all paid in full and a Lease Agreement has been entered into between the Landlord and Tenant(s).

 Signature (Applicant)

 Signature (Co-Applicant)

 Brokerage Firm

 Agent

Landlord acknowledges receipt of this Lease Application on _____ 20 _____. The landlords reserve the right to accept or reject the application.

 Signature (Landlord/property management)



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The following documents must be submitted with your application. Failure to do so may result in the rejection or case further delay in your application.

Documents needed to complete Application:

- Four (4) Current Paystubs
- Copy of Social Security Card
- Copy of State ID
- W2 & 1040 Tax returns
- 3 Current Bank Statement
- \$50.00 Application Fee

COMMISSION & FEES:

Broker Commission: _____ Date Received: _____

First Month Rent: _____ Date Received: _____

Security Deposit: _____ Date Received: _____

***** ONLY CASHIER'S (BANK) CHECKS OR MONEY ORDERS WILL BE
ACCEPTABLE PAYMENTS ***
(NO PERSONAL CHECKS ACCEPTED)**