

C.J. LOMBARDO REAL ESTATE COMPANY

LICENSED REAL ESTATE BROKER

335 MAIN STREET • HACKENSACK, NJ 07601 • (201) 488-2550 • FAX (201) 488-7419

www.rentthisapartment.com

FIRST TENANT

1. FULL NAME _____
First Middle Initial Last Jr. or Sr.

DATE OF BIRTH _____ SOCIAL SECURITY # _____

PRESENT ADDRESS _____
Street and Apt# City State Zip

HOW LONG AT PRESENT ADDRESS _____ CURRENT RENT _____ PHONE _____

LANDLORD NAME _____ ADDRESS _____ LL PHONE _____

PREVIOUS ADDRESS _____
Street and Apt# City State Zip

NAME OF EMPLOYER _____ JOB PHONE _____

ADDRESS OF EMPLOYER _____

YEARS EMPLOYED _____ SALARY _____ POSITION _____

2ND JOB OR ADDITIONAL INCOME _____ AMOUNT _____ 2ND JOB PHONE _____

NAME, ADDRESS & PHONE OF 2ND EMPLOYER (IF APPLICABLE) _____

EMAIL ADDRESS _____

SECOND APPLICANT OR SPOUSE IF ANY

2. FULL NAME _____
First Middle Initial Last Jr. or Sr.

DATE OF BIRTH _____ SOCIAL SECURITY # _____

PRESENT ADDRESS _____
Street and Apt# City State Zip

HOW LONG AT PRESENT ADDRESS _____ CURRENT RENT _____ PHONE _____

LANDLORD NAME _____ ADDRESS _____ LL PHONE _____

PREVIOUS ADDRESS _____
Street and Apt# City State Zip

NAME OF EMPLOYER _____ JOB PHONE _____

ADDRESS OF EMPLOYER _____

YEARS EMPLOYED _____ SALARY _____ POSITION _____

2ND JOB OR ADDITIONAL INCOME _____ AMOUNT _____ 2ND JOB PHONE _____

NAME, ADDRESS & PHONE OF 2ND EMPLOYER (IF APPLICABLE) _____

EMAIL ADDRESS _____

TOTAL NUMBER OF PEOPLE WHO WILL OCCUPY APT. _____ (PLEASE LIST NAME(S) & DOB(S) BELOW)

1. _____ DATE OF BIRTH _____ 2. _____ DATE OF BIRTH _____

3. _____ DATE OF BIRTH _____ 4. _____ DATE OF BIRTH _____

DO YOU HAVE A PET? YES NO DESCRIPTION _____

HOW DID YOU FIND US? RENTTHISAPT.COM DRIVE BY REF'D BY APTS.COM APT GUIDE ZILLOW APT FINDER CRAIGSLIST FORRENT.COM OTHER

REASON FOR MOVING _____

The undersigned hereby agrees for rental of the dwelling unit described herein and represents the facts contained are true. Any false information given will be grounds for rejection of this application, forfeiture of deposit monies, and possible future eviction. Only persons listed on this application may occupy the apartment. Any person over 18 years old is required to have a credit check completed. I also understand that this application is subject to the approval of the landlord, who I/We authorize to verify all information on the rental application by all means, including consumer reporting agencies, public records, current and previous rental property owners, employers, personal references and all public information. The **NON-REFUNDABLE** fee for the application is \$50.00 per person which must be paid at the time this application is completed. In addition, Applicant must pay a minimum \$200.00 as a deposit toward the entire balance prior to this application being processed. NO PERSONAL CHECKS WILL BE ACCEPTED. If the application is not accepted, the entire deposit MINUS the application fee will be returned to the Applicant. IF APPLICATION IS ACCEPTED, THE BALANCE OF THE FIRST MONTH'S RENT IS DUE WITHIN THREE (3) DAYS OF ACCEPTANCE OR THE APARTMENT WILL BE PUT BACK ON THE MARKET AND DEPOSIT MONEY WILL BE FORFEITED. ALL MONIES DUE ON APARTMENT MUST BE PAID PRIOR TO MOVE-IN DATE. **IF APPLICATION IS PROCESSED AND APPROVED BY LANDLORD, AND THE APPLICANT DECIDES NOT TO RENT THE APARTMENT FOR ANY REASON, ALL DEPOSIT MONEY, WITH EXCEPTION OF THE SECURITY DEPOSIT IS NON-REFUNDABLE.** Broker's commission, if applicable, is considered earned and is due and payable once the application is approved by Landlord. PLEASE MAKE PAYMENT PAYABLE TO: C.J. LOMBARDO RENTAL TRUST ACCOUNT. You can find a summary of your rights at WWW.CONSUMERFINANCE.GOV/LEARNMORE

BLDG. _____	RENT _____	SIGNATURE X _____
RENT _____	SEC. DEPOSIT _____	SIGNATURE X _____
APT.# _____	APPL. FEE _____	SIGNATURE X _____
MOVE IN DATE _____	BROKER FEE _____	WITNESS X _____
	TOTAL _____	DATE X _____
	DEPOSIT _____	
	BAL. DUE _____	