

# C.J. LOMBARDO REAL ESTATE COMPANY

LICENSED REAL ESTATE BROKER

235 MOORE STREET, 3<sup>rd</sup> Floor • HACKENSACK, NJ 07601 • (201) 488-2550 • FAX (201) 488-7419

[www.rentthisapartment.com](http://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 \_\_\_\_\_ BANK NAME \_\_\_\_\_ Type of Account  
 Savings  Checking  
DRIVER'S LICENSE # \_\_\_\_\_ STATE ISSUED \_\_\_\_\_

## 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 \_\_\_\_\_ BANK NAME \_\_\_\_\_ Type of Account  
 Savings  Checking  
DRIVER'S LICENSE # \_\_\_\_\_ STATE ISSUED \_\_\_\_\_  
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 \$75.00 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](http://WWW.CONSUMERFINANCE.GOV/LEARNMORE)

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