

THE O'CONNELL ORGANIZATION

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RENTAL APPLICATION

(Suggested questions to ask every applicant age 18 or older)

Today's Date: _____

Desired Occupancy Date: _____

Desired Rental Price: _____

Desired Unit Type: _____

Applicant's Personal Information

First Name: _____

Last Name: _____

Driver's License: _____

Birth date: _____

Current Address: _____

Social Security #: _____

Email: _____

Home Phone: _____

Work Phone: _____

Mobile Phone: _____

Car Make/Model: _____

Car License #: _____

Additional Occupants (List every occupant's name and their relationship below, including children)

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Preferred Method of "Worry-Free" Standard Rental Payments:

Electronic banking _____ Payroll deduction _____ Charge card _____

Debit card _____ Check _____ Money order _____

Are you able to handle all the minor maintenance/upkeep in the property? Yes ___ No ___

Do you have renter's insurance? YES _____ NO _____

Do you have any water-filled furniture? YES _____ NO _____

Have you ever broken a lease? YES _____ NO _____

Have you ever refused to pay rent for any reason?

YES _____ NO _____

Have you ever been evicted or asked to leave a rental unit?

YES _____ NO _____

Ever filed for bankruptcy? YES _____ NO _____

Ever been convicted of a crime? YES _____ NO _____

Will you give us permission to do a criminal background check?

YES _____ NO _____

Do you currently have any utilities in your name? YES _____ NO _____

Do you currently have phone service in your name? YES _____ NO _____

Is there anything to prevent you from placing utilities or phone in your name?

YES _____ NO _____

If yes, please explain

Do you know of anything or any reason which may interrupt your ability to pay rent?

Residence History

Present Residence Address:

City: _____ State: _____ ZIP: _____

Dates lived at this address? _____

Own: _____ Rent: _____ Occupy: _____

Current phone: _____

How many pets do you have? _____

Type: _____

Name of present landlord/owner/mortgage company:

Address of present landlord/mortgage company:

Landlord's phone: _____

Monthly payment: _____

Reason for moving:

Is your rent/mortgage current? YES _____ NO _____

Number of late payments: _____

Security deposit amount currently held by landlord? _____

Previous Residence

Address: _____

Previous landlord: _____

Phone: _____

Dates at this address: _____

Reason for moving? _____

Was your full security deposit returned? YES _____ NO _____

of late payments? _____

Monthly payment? _____

Previous Residence

Address: _____

Previous landlord: _____

Phone: _____

Dates at this address: _____

Reason for moving? _____

Was your full security deposit returned? YES _____ NO _____

of late payments? _____

Monthly payment? _____

Income History

Applicant's current employment status (check one):

Full-time Part-time (less than 32 hrs.) Student Retired

Self-Employed Unemployed Other

Primary source of employment:

Applicant employed by:

Supervisor's name: _____

Average weekly hours: _____ .

How long at the place of employment? _____

Address:

Phone: _____

Position: _____

Salary: _____

Please indicate weekly, biweekly, monthly, or annual average take home:

Additional Employment

Applicant employed by:

Supervisor's name: _____

Average weekly hours: _____ .

How long at the place of employment? _____

Address:

Phone: _____

Position: _____

Salary: _____

Please indicate weekly, biweekly, monthly, or annual average take home:

Additional Income/Payment Information

In the event of some emergency that would prevent you from paying rent when due, is there a relative, person, or agency that could assist you with rent payments?

1st Emergency Contact:

Name: _____

Relationship: _____

Address:

Phone Number: _____

Secondary Phone Number: _____

2nd Emergency Contact:

Name: _____

Relationship: _____

Address:

Phone Number: _____

Secondary Phone Number: _____

Do you currently have a savings account, line of credit, or charge card sufficient to cover one month's rent?

YES _____ NO _____

Additional Income: (optional)

If there are additional, verifiable sources of income you would like considered, please list income source (e.g., self-employment, social security, benefit payments), and requested information below regarding each source. Applicant may be required to produce additional documentation or provide and sign release statements. Child support, alimony, or separate maintenance need NOT be disclosed unless you desire this additional income to be considered for qualification.

Additional source _____

Amount: _____ Per: _____

Contact Person: _____

Phone: _____

How long have you been receiving income from this source?

How long do you expect this income to continue?

Is there any reason it would stop? YES _____ NO _____

Additional source _____

Amount: _____ Per: _____

Contact Person: _____

Phone: _____

How long have you been receiving income from this source?

How long do you expect this income to continue?

Is there any reason it would stop? YES _____ NO _____

Assets / Credits / Loans

Number of vehicles on property? _____

Valid registration and inspection? _____

Do you have any commercial vehicles, RV, campers, boats or motorcycles? If so, please list.

Please note, only cars on application are authorized to be on premises.

Vehicle 1

(make/model/color/year): _____

Plate number: _____

State: _____

Financed/leased through:

Contact and phone number:

Acct. # _____

Monthly payment: _____

Vehicle 2
(make/model/color/year): _____

Plate number: _____

State: _____

Financed/leased through:

Contact and phone number:

Acct. # _____

Monthly payment: _____

Credit Cards, Loans (including banks, department store, gas cards, student loans)

Creditor:

Address:

Phone: _____

Acct. #: _____

Total amount owed: _____

Monthly payment: _____ Are your payments current? _____

Other Creditor:

Address:

Phone: _____

Acct. #: _____

Total amount owed: _____

Monthly payment: _____ Are your payments current? _____

List any other current monthly expenses.

Hospital payment: _____

Health insurance: _____

Auto insurance: _____

Renter's insurance: _____

Child care: _____

Tuition: _____

Cable TV: _____

Other: _____

Bank Reference

Name of bank: _____

Phone: _____

Branch Address:

Checking acct. #: _____

Savings acct #: _____

How long account active? (C) _____

(S) _____

Average monthly balance: (C) _____

(S) _____

Personal/Professional References

Character/personal reference:

Name: _____

Relationship: _____

Address:

How long have you known this person? _____

Phone: _____

Professional reference (e.g., attorney, accountant):

Name: _____

Relationship: _____

Address:

How long have you known this person? _____

Phone: _____

Name of nearest living relative:

Name: _____

Relationship: _____

Address:

How long have you known this person? _____

Phone: _____

Thank you for completing an application to rent from us. Please sign below. Please note that a completed application requires submission of the following, which will be copied and attached to this application:

(CHECK TO INDICATE ALL ITEMS ARE ENCLOSED)

_____ Driver's license picture ID. Note: Rentals will not be shown without picture ID.

_____ Personal check (to verify bank)

_____ 2 weeks of most current pay stubs of each income source listed

_____ If self-employed, most current Schedule C tax return and proof of current income

By signing below, applicant hereby represents all information on this application is true, complete, and hereby authorizes annual verification of information, references, and credit history for continual rental consideration or for collection purposes should that become necessary. This fee is refundable/nonrefundable/or only refundable if applicant meets our minimal criteria but is not selected because they were not the first qualified applicant.

Applicant acknowledges this application will become part of the lease agreement when approved. If any information is found to be incorrect, the application will be rejected and any subsequent rental agreement becomes void. False and misleading statements will be sufficient reason for immediate eviction and loss of security deposit.

Applicant's signature: _____

Date: _____