



Leasing Office: 484 Lenox Avenue  
New York, NY 10037  
P (212) 862-8900 ~ F (212) 368-6465 ~ Web: [www.olnick.com](http://www.olnick.com)  
Office Hours: Monday, Tuesday, Thursday, Friday: 9:00 am – 5:00 pm  
Wednesday: 9:00 am – 7:00 pm  
Saturday: 10:00 am – 4:00 pm

Dear Applicant:

Thank you for your interest in renting at Lenox Terrace. Attached is a Residential Lease Application for you to review and complete. The completed and signed application, along with copies of all necessary documentation and application fees can be mailed or dropped off at the address listed above.

If you have any further questions or concerns, please do not hesitate to e-mail us at [dthompson@olnick.com](mailto:dthompson@olnick.com) or [pgrannum@olnick.com](mailto:pgrannum@olnick.com) or call us at (212) 862-8900.

We look forward to you joining the community at Lenox Terrace!

Sincerely,

Lenox Terrace Leasing Department



**ALL APPLICANTS/GUARANTORS MUST SUBMIT INDIVIDUAL COMPLETED APPLICATIONS.**

IN ORDER TO PROCESS YOUR APPLICATION WITHOUT DELAY,  
PLEASE BE SURE THE FOLLOWING HAS BEEN COMPLETED:

- ❑ The Residential Lease Application is completed and signed.  
(Be sure that your current and previous landlord's name, address, and contact numbers are listed.)
- ❑ The Credit Report Authorization is completed and signed.
- ❑ The Criminal Information Authorization is completed and signed.
- ❑ The Release of Information Authorization is completed and signed.
- ❑ The most recent copy of your completed, signed Income Tax Return is attached.
- ❑ The most recent copy of your W-2 or 1099 is attached.
- ❑ Copies of your last two months' bank statements are attached. Please be sure that all copies indicate your name, address and pertinent bank information.
- ❑ Copies of your last two pay stubs are attached.
- ❑ Copy of valid, unexpired picture identification is attached (i.e. Driver's License/ Passport).
- ❑ Employment information is completed.  
(If you are starting a new job, or you have been employed for less than three (3) years, you must submit a letter or copy of your employment contract stating your position, salary, and starting date.)
- ❑ A certified check or money order in the amount of \$100.00 per applicant, which is a non-refundable application fee, is made payable to **Lenox Terrace Development Associates**.

Your Residential Lease Application will be reviewed once a complete application has been submitted. After review, you will be contacted with the status of your application.

At this time an appointment can be scheduled to see an apartment and/or to sign the Residential Lease document. Please note that all Leases must be accompanied by two (2) Certified Checks or Money Orders made payable to **Lenox Terrace Development Associates**; for the first month's rent and security (amount to be determined on an individual application basis). Move-ins will only be scheduled once the Owner has countersigned the lease.

Please note that nothing contained herein or attached hereto shall constitute an offer of agreement to lease the apartment.



# RESIDENTIAL LEASE APPLICATION

I am interested in a:  Studio  1 Bedroom  2 Bedroom  3 Bedroom

## NOTICE UNDER NYCAC SECTION 20-808

The application information provided by you may be used to obtain a tenant screening report; the name and address of the consumer reporting agency that will be used to obtain such report is:

**Tenant Data Verification**  
344 Portion Road  
Lake Ronkonkoma, NY 11779

Pursuant to federal, state, and local law:

1. If we take adverse action against you on the basis of information contained in a tenant screening report, we must notify you that such action was taken and supply you with the name and address of the consumer reporting agency that provided the tenant screening report on the basis of which such action was taken;
2. If any adverse action is taken against you based on information contained in a tenant screening report, you have the right to inspect and receive a free copy of that report by contacting the consumer reporting agency;
3. Every tenant or prospective tenant is entitled to one free tenant screening report from each national consumer reporting agency annually, in addition to a credit report that should be obtained from [www.annualcreditreport.com](http://www.annualcreditreport.com); and
4. Every tenant or prospective tenant may dispute inaccurate or incorrect information contained in a tenant screening report directly with the consumer reporting agency.

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Social Sec. #: \_\_\_\_\_

Present Address: \_\_\_\_\_

Number of Rooms: \_\_\_\_\_ Number of Persons: \_\_\_\_\_ Rent/Mortgage Paid: \_\_\_\_\_

Length of Tenancy: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

Landlord's Name and Address: \_\_\_\_\_

\_\_\_\_\_ Telephone No. : \_\_\_\_\_

Previous Address: \_\_\_\_\_

Landlord's Name and Address: \_\_\_\_\_

\_\_\_\_\_ How Long? \_\_\_\_\_ Rent/Mortgage Paid: \_\_\_\_\_

If Guarantor Application, describe relationship to Applicant: \_\_\_\_\_

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**Current Employment:**

Job Title: \_\_\_\_\_ Annual Income: \_\_\_\_\_

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

Company Telephone No.: \_\_\_\_\_ Dept. Head: \_\_\_\_\_

Length of Employment: \_\_\_\_\_

**Previous Employment:**

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

Company Telephone No.: \_\_\_\_\_ Dept. Head: \_\_\_\_\_

Length of Employment: \_\_\_\_\_

Have you ever been evicted? no yes

Describe \_\_\_\_\_

Have you ever broken a lease? no yes

Describe \_\_\_\_\_

Have you ever been named or otherwise involved in a Landlord/Tenant proceeding or any other matter in housing court? no yes

Describe \_\_\_\_\_

Have you ever declared bankruptcy? no yes

Describe \_\_\_\_\_

Citizen Status: U.S. Citizen Permanent Resident (Green Card) Temporary Resident (No Green Card)

**PERSONS TO OCCUPY APARTMENT**

**Name**

**Relationship to Applicant**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**Bank Accounts:**

Checking: Account # \_\_\_\_\_ Bank \_\_\_\_\_ Branch \_\_\_\_\_

Savings: Account # \_\_\_\_\_ Bank \_\_\_\_\_ Branch \_\_\_\_\_

**Additional Sources of Income** (Stocks, Pensions, Etc.): \_\_\_\_\_

**Applicant's Accountant:**

Name \_\_\_\_\_ Address \_\_\_\_\_ Telephone No. \_\_\_\_\_

**Applicant's Attorney:**

Name \_\_\_\_\_ Address \_\_\_\_\_ Telephone No. \_\_\_\_\_

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**Additional References:**

1. \_\_\_\_\_  
Name \_\_\_\_\_ Address \_\_\_\_\_ Telephone No. \_\_\_\_\_

2. \_\_\_\_\_  
Name \_\_\_\_\_ Address \_\_\_\_\_ Telephone No. \_\_\_\_\_

**How did you find this apartment?**  New York Times Ad  Other Advertising Publication  Website  Reference/Referral  
 Other (describe) \_\_\_\_\_

**Broker's Information**

Name: \_\_\_\_\_

Company: \_\_\_\_\_

I hereby warrant that all my representations set forth above are true and agree to notify Landlord in writing if any above representations shall change after the date below. I further represent that I am not renting a room or an apartment under another name, nor have I ever been dispossessed from my apartment nor am I now being dispossessed. I understand this notice will also apply to future update reports that may be requested. I acknowledge that Landlord will not consider my application unless and until I provide a non-refundable application fee in the amount of \$100.00 per applicant.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**FOR OFFICE USE ONLY**

Apt. \_\_\_\_\_ No. of Rooms: \_\_\_\_\_ Building: \_\_\_\_\_ Rental: \_\_\_\_\_

Agent: \_\_\_\_\_ Deposit Received: \_\_\_\_\_

Lease Date to Commence on: \_\_\_\_\_ Length of Lease: \_\_\_\_\_



## CREDIT REPORT AUTHORIZATION

Dear Applicant(s):

In order for us to comply with the provisions of Section 606 of the Fair Credit Reporting Act, you must authorize us to retain a Credit Reporting Agency, who may obtain, prepare and furnish credit reports concerning you, and may obtain and furnish information on your character, general reputation, personal characteristics and mode of living.

We understand that upon request, you are entitled to a disclosure of the nature and scope of the investigating to be requested by us of said Credit Reporting Agency.

Please sign where indicated below to authorize us to obtain the above mentioned Credit Report.

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FULL NAME (PRINT)

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SIGNATURE

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DATE

# CRIMINAL INFORMATION AUTHORIZATION

## RELEASE OF INFORMATION AUTHORIZATION

I HEREBY AUTHORIZE ANY INDIVIDUAL, COMPANY, OR INSTITUTION TO RELEASE TO TENANT DATA VERIFICATION CO. AND/OR ITS REPRESENTATIVE ANY AND ALL INFORMATION THAT THEY HAVE CONCERNING ANY REPORT CONCERNING SAID APPLICANT LISTED BELOW.

I HEREBY RELEASE THE INDIVIDUAL, COMPANY, OR INSTITUTION AND ALL INDIVIDUALS CONNECTED THEREWITH FROM ALL LIABILITY FOR ANY DAMAGE WHATSOEVER INCURRED IN FURNISHING SUCH INFORMATION.

Print Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Social Security #: \_\_\_\_\_--\_\_\_\_--\_\_\_\_\_

Driver's License #: \_\_\_\_\_

\_\_\_\_\_  
Signature

## RELEASE OF INFORMATION AUTHORIZATION

I HEREBY AUTHORIZE **TENANT DATA VERIFICATION, CO., INC.**, TO OBTAIN A CREDIT INQUIRY ON MY ACCOUNT OR ACCOUNTS FROM ANY INDIVIDUAL, COMPANY, OR INSTITUTION FOR THE PURPOSE OF RENTAL OR PURCHASE OF ANY APARTMENT.

**I HEREBY RELEASE THE INDIVIDUAL, COMPANY, OR INSTITUTION AND ALL INDIVIDUALS CONNECTED THEREWITH FROM ALL LIABILITY FOR ANY DAMAGE WHATSOEVER INCURRED IN FURNISHING SUCH INFORMATION.**

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FULL NAME (PRINT)

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ADDRESS

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CITY

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STATE

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ZIP

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SIGNATURE

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DATE