STATE RENAISSANCE COURT

www.statestreetliving.com

MARKET RATE APPLICATION

THERE IS A \$60.00 CREDIT CHECK FEE, PER APPLICATION, PAYABLE TO "IBEC BUILDING CORPORATION". PLEASE SUBMIT THIS PAYMENT WITH YOUR APPLICATION.

MAIL COMPLETED APPLICATION TO: STATE RENAISSANCE COURT

C/O IBEC BUILDING CORPORATION 55 BROAD STREET, 16th FLOOR NEW YORK, NY 10004-2501 TEL (212) 747-0227

TEL (212) 747-0227 FAX (212) 747-0215

PLEASE NOTE: IF YOUR APPLICATION IS ACCEPTED AND YOU SUBMIT A SECURITY

DEPOSIT FOR THIS OR ANY OTHER APARTMENT, AND IN THE EVENT YOU WITHDRAW YOUR APPLICATION, YOU WILL FORFEIT THE ENTIRE

SECURITY DEPOSIT.

Α.

PLEASE TYPE OR PRINT LEGIBLY										
FOR OCCUPANCY AT APARTMENT:										
ABOUT YOU:										
Name:			M/F							
Street Address:			Apt. No							
City:	_, State:	Zip:	Home Phone							
Work Phone:	_ Cell Phone:		Email Address:							
Social Security No.:		Date of Bir	th:							
Name:(co-applicant):			M/F							
Street Address:			Apt. No							
City:	_, State:	Zip:	Home Phone							
Work Phone:	_ Cell Phone:		Email Address:							
Social Security No.:		Date of Bir	th:							
Current monthly rent? \$ How much do you contribute to the total monthly rent?										
(If you do not contribute anythin	ng write "0")									
No. of bedrooms?	_No. of occupants	?	_How long at this address?Years							
Whose name is on the lease?			Relationship to applicant?							
Landlord/Managing Agent:										
Landlord's Address:										
Landlord's phone #			_							
Previous residence address										
Previous Landlord's name			Phone #							
Previous Landlord's address										

B. ABOUT YOUR WORK:

Current employer (applicant)		Phone _						
Address								
Type of business	Your position							
Gross Annual income \$((Per Year). Start Date Full Time?							
Supervisor's Name	Phone							
Current employer (co-applicant)		Phone _						
Address								
Type of business	Your po	sition						
Gross Annual income \$(Per Year). Start Date _		Full Time?					
Supervisor's Name		Phone						
Previous employer (applicant)		Phone _						
Address								
Type of business	Your po	sition						
Gross Annual income\$ (Per Yea	r). Start Date	End Da	te					
Supervisor's Name		Phone						
Previous employer (co-applicant)			Phone					
Address								
Type of business	Your po	sition						
Gross Annual income\$ (Per Yea	r). Start Date	End Da	te					
Supervisor's Name	Phone							
INCOME FROM OTHER SOURCE	S:							
List all other income, for example, Ir property, unemployment compensation pension, Social Security, disability compensation	on, child support, al	imony, schola	rships and/or grants,					
Household Member	Type of Income	Ar	<u>mount</u>					
		\$	Per					
		\$	Per					
		 \$	Per					
		 \$	Per					
		Ψ	. 0.					
TOTAL ANNUAL HOUSEHOLD IN	ICOME:							
(Add All Income Listed Above and Indicate	te the Total Earned for t	he Year)						
\$	PER YEAR							

C.	HOUSEHOLD:	HOUSEHOLD:									
	How many persons in your household, including yourself, WILL LIVE IN THE UNIT FOR WHICH YOU ARE APPLYING?										
	List all of the people WHO WILL LIVE IN THE UNIT FOR WHICH YOU ARE APPLYING , starting with yourself, and provide the following information.										
	<u>Full Name</u>	Relationship to Applicant	Birth <u>Date</u>	<u>Age</u>	<u>Sex</u>	Occupation	✓if F/T Student				
	1	SELF									
	2										
	3										
	4										
	5										
D.	GENERAL:										
	How did you hear about	How did you hear about this development? (Please check one)									
	[] Sign Posted on Bui [] Newspaper	lding	_			hich?)					
	SIGNATURE:										
result in Owner of applicate other in person p which n	vestigative agencies employed by su pertaining to my employment history nay result thereby. I have been advi	atial and if the Owner or it's applicant is approved, this aption provided by the application. Owner and/or their Agents, ch to investigate the reference, credit, prior tenancies, and sed that I have the right, und	Agent deems a pplication is to at is deemed to IBEC Building tes herein listed for Section 606	ny answer of be made a pu be false or n g Corp. to us d or statemen o obtain a co 8 of the Fair	r statement hart of the leasnisleading, and see any consumats or other densumer report Credit Repo	erein to be false or misle se entered into by the app ny lease granted by the vener reporting agency, created obtained from me or the and such other credit is an advanced to the credit is an advance	eading, it will colicant and irtue of this edit bureau, or from any other information				
	easonable time, for a complete and	·	•	• •	Ü						
SIGNATURE											
In cas	se of emergency involving y	ou, who should we co	ontact?								
	Name			Ac	ddress						
	Tel. No.			Rei	ationship						

Telephone (212) 747-0227 Fax (212) 747-0215

Attention Applicant:

In order to process your application, you must pay the credit check fee of \$60.00 per application made payable to IBEC Building Corp. This fee will cover the credit check & housing court search. It is non-refundable. This is not a broker's fee. If you are accepted for an apartment, in order to reserve the apartment, you must pay the security deposit (equal to one month's rent) and at lease signing you will pay the first month's rent.

In order for us to further process your application, please supply the following:

- Clear <u>copies</u> of the last four consecutive pay stubs, or a job letter stating title, salary and date of hire. (For all working adults)
- Clear **copies** of all W-2 Forms for the prior calendar year (For all working adults)
- Clear **copies** of your 1040 Form for the prior calendar year. (For all working adults)
- Consecutive rent receipts for the past six months (if canceled checks, copies of **both** front & back of the canceled checks are required)

This document was created with Win2PDF available at http://www.win2pdf.com. The unregistered version of Win2PDF is for evaluation or non-commercial use only.