



30 Park Avenue
New York, NY 10016
Tel: 212-996-8400 Fax: 646-723-9302

www.montereyatpark.com

Lease application process

Apt: # _____ Rent \$ _____ Income Requirement (40 x monthly rent) \$ _____

To qualify an applicant must have good credit and earn an income equal or greater than 40 times the monthly rent and has no past or pending landlord tenant litigation.

DOCUMENTS NEEDED

A. If you work for a company:

1. Photo Id
2. Employment letter on employer's letterhead verifying:
 - a) Length of employment
 - b) Annual Income for the past 2 years (include any bonus, rental allowance or other extra income)
3. Copy of your 2 most recent pay stubs
4. If employed less than 2 years, provide prior W2, tax return or employment letter from your prior employer
5. 2 most recent bank statements
6. Letter of reference from your landlord
7. Pet photo and a vet letter if applicable

B. If you are self-employed or commission based:

1. Photo Id
2. Letter from your accountant verifying:
 - a) Length of employment, type of business
 - b) Annual income for the past 2 years
3. Copy of your complete federal income tax return from the past year (including all schedules, W2 & 1099 forms)
4. 2 most recent bank statements
5. Letter of reference from your landlord
6. Pet photo and a vet letter if applicable

C. Guarantor Requirements (at least 70 X monthly rent):

1. Income requirement \$ _____
2. All items listed in A or B above

D. Non US resident Applicant :

If the applicant is a new hire, we will ask for 2 months security and a letter of employment advising on the length of the assignment

1. All items listed in A or B above
2. 2 most recent bank statements or account opening statement
3. Color copy of a picture ID and a copy of valid working visa

Rent \$ _____ Security Deposit \$ _____



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www.montereyatpark.com leasing@themonterey.com Agent: _____
Include the following

Landlord verification letter Proof of Income Photo ID Additional applications if applicable Pet Photo

Date _____ Lease Date _____ Apt. # _____ Monthly Rent \$ _____ Lease Term _____

Source _____

Applicant Information

Last Name _____ Middle Name _____ First Name _____

| | | |
|------------------------|---------------|----------------|
| Social Security Number | Date of Birth | E-mail Address |
| Cell Phone | Home Phone | Work Phone |

Current Address

| | | | | | |
|------------------|--------------------|----------|--------------|-------|-----|
| Street Address | | | City | State | zip |
| Date moved- in | Scheduled move out | Landlord | Monthly rent | | |
| Landlord Phone # | Reason for leaving | | | | |

Current Employment

| | | |
|-----------------|------------------|------------------|
| Job Title | Employer | Income |
| Supervisor Name | Supervisor Phone | Employer Address |
| Start Date | Other Income | Amount |

Additional Occupants

| | | | |
|------------|-----------|--------------|-----------------------|
| First Name | Last Name | Relationship | DOB ____/____/____ |
| First Name | Last Name | Relationship | DOB ____/____/____ |
| First Name | Last Name | Relationship | DOB ____/____/____ |

Pets

| | | | |
|------|------|-------|----------------------|
| Name | Type | Breed | Weight (full growth) |
|------|------|-------|----------------------|

Banking Information

| | | |
|--------------|----------------|---------------|
| Bank name | Branch Address | Phone |
| Account Type | Contact Name | Contact Phone |

| | | | |
|---|----------------------------|----------------------------|----------------|
| Have you ever been convicted/Arrested | <input type="checkbox"/> Y | <input type="checkbox"/> N | If yes explain |
| Have you been evicted by a landlord | <input type="checkbox"/> Y | <input type="checkbox"/> N | If yes explain |
| Any litigation, suits, Judgments, bankruptcies... | <input type="checkbox"/> Y | <input type="checkbox"/> N | If yes explain |

Emergency Contact

| | | | |
|------|--------------|--------|-------|
| Name | Relationship | E-mail | Phone |
|------|--------------|--------|-------|

AUTHORIZATION PLEASE READ CAREFULLY BEFORE SIGNING

The Landlord will in no event be bound, nor will possession be given, unless and until a lease executed by the Landlord has been delivered to the Tenant. The applicant and his references must be satisfactory to the Landlord.

I hereby warrant that all my representations set forth herein are true. I recognize the truth of the information contained herein is essential. I further represent that I am not renting a room or an apartment under any other name, nor have I ever been dispossessed from any apartment, nor am I now being dispossessed. I represent that I am over 18 years of age.

I have been advised that I have the right, under section 8068 of the Fair Credit Reporting Act, to make a written request, directed to the appropriate credit reporting agency, within reasonable time, for a complete and accurate disclosure of the nature and scope of any credit investigation. I understand that upon submission, this application and all documents become the property of the Landlord of Agent, and will not be returned to me under any circumstances.

I authorize the verification of the above referenced information and its release to the Landlord or Agent or other parties connected with the lease contemplated herein. I authorize **The Monterey Properties and its subsidiaries and Corelogic Safe Rent** to obtain a consumer credit report on me and to verify any information on this application with regard to my employment history current and prior tenancies and all other information which the management company deems pertinent to my obtaining residency and to release such information to the owner/landlord/agent set forth above. I will present any other information required by the Landlord or Agent in connection with the lease contemplated herein.

If I decide to cancel this application, fail to sign the lease I understand I would forfeit the non-refundable application fee of \$17.71 (per applicant).

Signature _____ Date _____



Step 1: General Information (Please Print)

Name (Cardmember/ Cardholder) _____
Name (Lessee) – if different _____
Address* _____ Apt. # _____ Home Phone _____
City _____ State _____ Zip _____ Work Phone _____
Email Address _____

Terms and Conditions

I (Cardmember/Cardholder) hereby authorize 30 Park Avenue LLC (Lessor) to charge the amount indicated above to the credit Card (Card) account above, for the payment of rent and/or associated fees pursuant to the lease ("Rent") for the apartment number and Lessee designated above. I understand that these charges will be processed immediately. I, Card member/ Cardholder understand that a right to a refund from the credit card company or the Lessor (whether or not I am the Lessee) is subject to all terms of the underlying lease for which I have made the Rent payment. In the event the Card is declined for payment for any reason, I understand that Lessee remains responsible for all rents and associated fees due according to the terms and conditions of the Lease Agreement. These Terms and Conditions will become part of the Lease Agreement and permanent resident file. In the event that I, Card member/ card holder, am not the Lessee pursuant to the Lease Agreement, I understand and agree that I have no rights of occupancy or tenancy and that such payment of Rent charges is being done strictly as an accommodation to such Lessee. I acknowledge and agree that Lessor may, from time to time, receive updated Card or billing information directly from the credit card company. Lessee understands and agrees that the payment by credit card is not an essential, required or auxiliary service provided by the landlord.

Card member/ Card holder's Signature _____ Date _____

Payment Information

*For future residents, please enter the address at your new property.

| Charges: | Amount | Category |
|-----------|---------|-----------------|
| Charge #1 | \$17.71 | Application fee |
| Charge #2 | | |
| Charge #3 | | |

Card # _____ CVV Code: (for Amex) _____ Expiration Date (mm/yy) _____

Card member's Name as it appears on Card _____

Credit Card Billing Address _____ City _____ State _____ Zip _____

Authorized Signature _____ Date _____