

**SOLER REALTY NYC**  
**1424 Williamsbridge Road Bronx,**  
**NY 10461**  
**PH: 917-710-3528 FAX: 347-745-5245**  
**WWW.SOLERREALTYNYC.COM**

**THANK YOU FOR YOUR INTEREST IN RENTING AN APARTMENT WITH US. THE FOLLOWING MUST BE INCLUDED WHEN SUBMITTING YOUR APPLICATION TO THIS OFFICE.**

1. Please complete (1) one application per family in full, with all the required documents.

**\*\*\*\*INCOMPLETE APPLICATION WILL BE REJECTED\*\*\*\***

2. There is a **\$50.00** application fee per adult. This fee is for the credit check, landlord history, background and criminal history. (All late payments, legal proceedings and judgements will be found in Credit Bureaus. This fee is NON-REFUNDABLE.)

**\*\*\*NO PERSONAL CHECKS ACCEPTED. ONLY CASH/MONEY ORDER/CASHIER CHECKS\*\*\*\***

3. Include 1 month consecutive current pay stubs from your employer.

4. Proof of any additional income – Pension, Social Security, Alimony, etc.

5. Submit an employer reference letter stating your salary, position and length of employment.

6. Submit a clear copy of your previous W-2 and TAX RETURN.

7. Submit a clear copy of Social Security card and (2) picture id ex. (Driver's license or state id)

**\*\*\*\*IF YOU LEAVE A DEPOSIT ON AN APARTMENT AND DECIDE TO NOT ACCEPT THE APARTMENT AFTER BEING APPROVED 25% WILL BE DEDUCTED FROM YOUR ORIGINAL DEPOSIT.\*\*\*\***

**All Questions must be answered or this application can not be processed!**

Desired move in date: \_\_\_\_\_ Rent: \_\_\_\_\_ Size: \_\_\_\_\_

Applicants Full Name: \_\_\_\_\_ Work# \_\_\_\_\_

Co-Applicants Full Name: \_\_\_\_\_ Work# \_\_\_\_\_ Social

Security No: \_\_\_\_\_ DOB \_\_\_\_\_ Cell# \_\_\_\_\_

Current Address: \_\_\_\_\_ City \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Home # \_\_\_\_\_ Email: \_\_\_\_\_

Apartment is for how many people: \_\_\_\_\_ Adults \_\_\_\_\_ Children \_\_\_\_\_

Do you have any pets? \_\_\_\_\_ What size? \_\_\_\_\_ How many? \_\_\_\_\_ What type? \_\_\_\_\_

Are you or someone you are dependent upon currently serving in the military? Yes or No  
If yes provide full name and relationship to you

\_\_\_\_\_ List the names of all others who will occupy the apartment.

\_\_\_\_\_ Relationship to Occupant \_\_\_\_\_ self DOB \_\_\_\_\_

\_\_\_\_\_ Relationship to Occupant \_\_\_\_\_ DOB \_\_\_\_\_

\_\_\_\_\_ Relationship to Occupant \_\_\_\_\_ DOB \_\_\_\_\_

\_\_\_\_\_ Relationship to Occupant \_\_\_\_\_ DOB \_\_\_\_\_

\_\_\_\_\_ Relationship to Occupant \_\_\_\_\_ DOB \_\_\_\_\_

Current lease: Reason for Moving \_\_\_\_\_

Who name appears on the lease? \_\_\_\_\_

What is your relationship to the leaseholder? \_\_\_\_\_

Who is your current landlord? \_\_\_\_\_ tel \_\_\_\_\_

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**List all previous addresses for the past 6 years**

\_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

\_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

\_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_

**Source of Income/ Employment**

Present Employer/ source \_\_\_\_\_ Position \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Length of employment \_\_\_\_\_ Annual salary \_\_\_\_\_

Supervisor name \_\_\_\_\_ Tel \_\_\_\_\_

**Banking and Credit references**

Bank name \_\_\_\_\_ tel \_\_\_\_\_

Checking acct # \_\_\_\_\_ Saving acct # \_\_\_\_\_

Credit reference \_\_\_\_\_ Tel \_\_\_\_\_

Address \_\_\_\_\_ Acct# \_\_\_\_\_ Credit  
reference \_\_\_\_\_ Acct# \_\_\_\_\_

**Have you ever:** (Please be honest)

Been sued for non-payment of rent? Yes \_\_\_\_\_ No \_\_\_\_\_

Been evicted or asked to move out? Yes \_\_\_\_\_ No \_\_\_\_\_

Broken a rental agreement or lease? Yes \_\_\_\_\_ No \_\_\_\_\_

Had a previous credit problem? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes,

explain \_\_\_\_\_ What is your  
credit score? \_\_\_\_\_

If not available rate your credit: Excellent \_\_\_ Good \_\_\_ Fair \_\_\_ Poor \_\_\_

**I hereby authorize the landlord and/or its Broker/Agent to verify the above information as well as obtain reports from credit agencies. In order to comply with the provisions of section 6.0(A) of the Federal fair credit reporting act, I authorize you to retain a credit reporting agency, which may obtain, prepare, furnish and use information on my character and general reputation, as well as information regarding to employment, credit, criminal and current financial position.**

**Applicants signature** \_\_\_\_\_ **Date** \_\_\_\_\_