



131 Market St. Saddle Brook, NJ 07663 ♦ Office: (201) 843-2000 ♦ Fax: (201) 843-2002
remaxsellsnj@gmail.com

Date: _____

Property for which this application is for: _____

How many Children/Adults? _____

Smoking (Y/N) _____ Pets (Y/N) _____ Has Applicant(s) ever been evicted? (Y/N) _____

Desired Move-In Date: _____

Applicant

Co-Applicant

Name: _____

Name: _____

Current Address: _____

Current Address: _____

Phone #: _____

Phone #: _____

Email: _____

Email: _____

Date of Birth: _____

Date of Birth: _____

Occupation: _____

Occupation: _____

Income: _____

Income: _____

Employer Name: _____

Employer Name: _____

Employer Address: _____

Employer Address: _____

Employer Contact: _____

Employer Contact: _____

Length of Employment: _____

Length of Employment: _____

Current Landlord: _____

Current Landlord: _____

Contact: _____

Contact: _____

Current Rent: _____

Current Rent: _____

How Long a Tenant: _____

How Long a Tenant: _____

Reason for Moving: _____

Reason for Moving: _____



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References: 2 Non-Relative references per person

Name: _____

Address: _____

Phone #: _____

Relationship: _____

Name: _____

Address: _____

Phone #: _____

Relationship: _____

Name: _____

Address: _____

Phone #: _____

Relationship: _____

Name: _____

Address: _____

Phone #: _____

Relationship: _____

Applicants for tenancy for a Condominium/Co-operative unit generally must be provided with the following statement as provided by New Jersey law:

THIS BUILDING IS BEING CONVERTED TO OR IS A CONDOMINIUM OR CO-OPERATIVE. YOUR TENANCY CAN BE TERMINATED UPON 60 DAYS NOTICE IF YOUR APARTMENT IS SOLD TO A BUYER WHO SEEKS TO PERSONALLY OCCUPY IT. IF YOU MOVE OUT AS A RESULT OF RECEIVING SUCH A NOTICE AND THE LANDLORD ARBITRARILY FAILS TO COMPLETE THE SALE, THE LANDLORD SHALL BE LIABLE FOR TREBLE DAMAGES AND COURT COSTS. I/We hereby warrant that all representations set forth above are true. To verify the above statements, I/We direct persons named in this application to give any requested information concerning me/us. I/We hereby waive all rights of action for consequences as a result of such information. I/We hereby authorize and grant permission to the below named real estate firm to do a credit check and will pay \$ _____ for cost of process. The attached Information Release Form should be for such credit inquiries. I/We hereby authorize the below named real estate firm to provide the information obtained from such credit bureau to the landlord. It is understood that Tenant Applicant(s) cannot take possession of rental until application is investigated and accepted by the Landlord, the first month's rent and full security deposit is paid, and a Lease Agreement has been entered into between the Landlord and Tenant(s).

Applicant

Co-Applicant

Brokerage Firm

Agent

Address

Phone Number