



# NEW JERSEY REALTORS® STANDARD FORM OF LEASE APPLICATION

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|                                                                       |                                   |                                |                                                  |
|-----------------------------------------------------------------------|-----------------------------------|--------------------------------|--------------------------------------------------|
| LEGAL NAME OF APPLICANT                                               |                                   |                                | DATE OF APPLICATION                              |
| PRESENT ADDRESS                                                       |                                   |                                | HOME PHONE NUMBER                                |
| DATE OF BIRTH                                                         | OCCUPATION                        |                                | YEARLY INCOME                                    |
| EMPLOYER                                                              |                                   | EMPLOYER ADDRESS               |                                                  |
| LENGTH OF EMPLOYMENT                                                  | EMPLOYMENT VERIFICATION DEPT. NO. | PRESENT LANDLORD               | LANDLORD BUS. PHONE                              |
| PRESENT RENT                                                          | HOW LONG A TENANT                 | LEASE EXPIRATION DATE          | IN CASE OF EMERGENCY NOTIFY (NAME AND PHONE NO.) |
| LEGAL NAME OF CO-APPLICANT                                            |                                   |                                |                                                  |
| PRESENT ADDRESS                                                       |                                   |                                |                                                  |
| DATE OF BIRTH                                                         | OCCUPATION                        |                                | YEARLY INCOME                                    |
| EMPLOYER                                                              |                                   | EMPLOYER ADDRESS               |                                                  |
| LENGTH OF EMPLOYMENT                                                  | EMPLOYMENT VERIFICATION DEPT. NO. | PRESENT LANDLORD               | LANDLORD BUS. PHONE                              |
| PRESENT RENT                                                          | HOW LONG A TENANT                 | LEASE EXPIRATION DATE          | IN CASE OF EMERGENCY NOTIFY (NAME AND PHONE NO.) |
| APPLICANTS INTEND TO USE THE LEASED PREMISES AS FOLLOWS:              |                                   |                                |                                                  |
| AUTO LIC. PLATE - APPLICANT                                           |                                   | AUTO LIC. PLATE - CO-APPLICANT |                                                  |
| ANY PETS?<br><input type="checkbox"/> YES <input type="checkbox"/> NO | IF YES, WHAT KIND                 | HOW MANY                       | SIZE                                             |

## APPLICANT'S REFERENCES (OTHER THAN RELATIVES)

| NAME | ADDRESS | PHONE NO. |
|------|---------|-----------|
| 1    |         |           |
| 2    |         |           |
| 3    |         |           |

## CO- APPLICANT'S REFERENCES (OTHER THAN RELATIVES)

| NAME | ADDRESS | PHONE NO. |
|------|---------|-----------|
| 1    |         |           |
| 2    |         |           |
| 3    |         |           |



**BANK REFERENCES - APPLICANT****BANK REFERENCES - CO-APPLICANT**

CHECKING (NAME OF BANK &amp; ACCOUNT NO.)

CHECKING (NAME OF BANK &amp; ACCOUNT NO.)

SAVINGS (NAME OF BANK &amp; ACCOUNT NO.)

SAVINGS (NAME OF BANK &amp; ACCOUNT NO.)

OTHER (CREDIT CARDS)

OTHER (CREDIT CARDS)

WILL APPLICANT'S EMPLOYER BE RESPONSIBLE FOR PAYMENT OF RENT? ☐ YES ☐ NO**PROPERTY FOR WHICH THIS IS AN APPLICATION**

ADDRESS

LANDLORD

PHONE NUMBER

ADDITIONAL INFORMATION

Landlord acknowledges receipt of this Lease Application on \_\_\_\_\_. The Landlords reserves the right to accept or reject the application.

Brokerage fee to be paid by: ☐ LANDLORD ☐ TENANT

Rental Application Fee: \_\_\_\_\_

Security Deposit Due By: \_\_\_\_\_

Lease Deposit in the Amount of: \_\_\_\_\_

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.

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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