



LIBERTY PLACE
PROPERTY MANAGEMENT

**122 East 42nd Street, Suite 1903
New York, NY 10168**

**Tel: (646) 545-6700
Fax: (646) 304-2255
Leasing Direct Line: (646) 545-6700**

Thank you for choosing a Liberty Place Property Management apartment.

1. Applicants must show income of **40 TIMES THE MONTHLY RENT**. (may be combined among applicants)
2. Guarantors must show income of **80 TIMES THE MONTHLY RENT**. (may NOT be combined with applicants)
3. Applications packages must be submitted in full as detailed below. Only complete applications will be reviewed and considered for tenancy.
4. Applications will not remove apartments from the market.
5. Lease signings must be scheduled within three (3) days of approval or the backup applicant will be considered.

We look forward to servicing your residential needs.

YOUR APPLICATION PACKAGE MUST INCLUDE:

- ☐ **Completed and Signed application by applicants and guarantors**
- ☐ **\$50.00 Non-refundable processing fee per adult applicant and per guarantor-** Money order or cashier's check ONLY!
- ☐ **Driver's License or Photo ID** (18 & over)
- ☐ **Social Security Card**
- ☐ **Financial Statement – First Page (Checking, Savings and/or other assets)**
- ☐ **Previous year tax returns – First Page**
- ☐ **Proof of Employment if you work for a company:**
 1. Letter on company letterhead including length of employment, salary & position
 2. Last 4 paystubs (If paid weekly) - or - Last 2 paystubs (if paid bi-weekly or semi-monthly)
- ☐ **Proof of Employment if you are self-employed:**
 1. Previous year 1099
 2. Notarized Letter from your accountant on his/her company letterhead verifying:
 - A. Nature of the business
 - B. Length of employment
 - C. Income holdings
 - D. Projected annual income expected for the current year and upcoming year.

CORPORATE APPLICANTS MUST SUBMIT A SEPARATE APPLICATION ALONG WITH:

- ☐ \$150.00 Non-refundable application fee
- ☐ Corporate officer as a guarantor
- ☐ Information of the company employee that will occupy the apartment
- ☐ Certified Financial Statements
- ☐ Corporate Tax Returns (two (2) most recent consecutive returns)



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INCOMPLETE APPLICATIONS WILL DELAY PROCESSING. PLEASE WRITE (N/A) WHERE NOT APPLICABLE

TODAY'S DATE:	BUILDING ADDRESS APPLYING FOR	APARTMENT	DESIRED MOVE IN DATE?
MONTHLY RENT:	APARTMENT TYPE: <input type="checkbox"/> STUDIO <input type="checkbox"/> 1 BEDROOM <input type="checkbox"/> 2 BEDROOM <input type="checkbox"/> 3 BEDROOM <input type="checkbox"/> 4 BEDROOM		

HOW DID YOU HEAR ABOUT US?

☐ BUILDING SIGN ☐ CRAIGSLIST ☐ BROKER _____ PHONE: _____

☐ OTHER: _____

APPLICANT GENERAL INFORMATION

NAME OF APPLICANT:		SOCIAL SECURITY NUMBER:		DATE OF BIRTH:	SEX:
EMAIL ADDRESS		HOME PHONE NUMBER:		CELL PHONE NUMBER:	
CURRENT ADDRESS:	CITY:	STATE:	ZIP:	DRIVER'S LICENSE NUMBER:	STATE:
CURRENT LANDLORD'S NAME:		LENGTH AT CURRENT ADDRESS: Year(s) Month(s)		MONTHLY RENT:	
CURRENT LANDLORD'S ADDRESS:		WHY ARE YOU MOVING?			

CO-APPLICANT GENERAL INFORMATION

RELATIONSHIP TO APPLICANT ABOVE:					
NAME OF CO-APPLICANT:		SOCIAL SECURITY NUMBER:		DATE OF BIRTH:	SEX:
EMAIL ADDRESS		HOME PHONE NUMBER:		CELL PHONE NUMBER:	
CURRENT ADDRESS:	CITY:	STATE:	ZIP:	DRIVER'S LICENSE NUMBER:	STATE:
CURRENT LANDLORD'S NAME:		LENGTH AT CURRENT ADDRESS: Year(s) Month(s)		MONTHLY RENT:	
CURRENT LANDLORD'S ADDRESS:		REASON FOR MOVING?			

GUARANTOR GENERAL INFORMATION

RELATIONSHIP TO APPLICANT(S):					
NAME OF GUARANTOR:		SOCIAL SECURITY NUMBER:		DATE OF BIRTH:	SEX:
EMAIL ADDRESS		HOME PHONE NUMBER:		CELL PHONE NUMBER:	
CURRENT ADDRESS:	CITY:	STATE:	ZIP:	DRIVER'S LICENSE NUMBER:	STATE:
CURRENT LANDLORD'S NAME:		LENGTH AT CURRENT ADDRESS: Year(s) Month(s)		MONTHLY RENT:	

NAME(S) OF OCCUPANTS: NOT APPLICANTS	RELATIONSHIP	DATE OF BIRTH:	SOCIAL SECURITY #:	AGE:	SEX:

APPLICANT FINANCIAL INFORMATION

CURRENT EMPLOYER:	ADDRESS:
CURRENT POSITION:	EMPLOYED SINCE:
SUPERVISOR:	PHONE NUMBER:
EMPLOYMENT INCOME: <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly	OTHER INCOME \$ _____ Per _____ SOURCE: _____
FINANCIAL INSTITUTION INFORMATION:	
Checking _____ Address _____ Phone: _____	
Savings _____ Address _____ Phone: _____	
Investment _____ Address _____ Phone: _____	

CO-APPLICANT FINANCIAL INFORMATION

CURRENT EMPLOYER:	ADDRESS:
CURRENT POSITION:	EMPLOYED SINCE:
SUPERVISOR:	PHONE NUMBER:
EMPLOYMENT INCOME: <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly	OTHER INCOME \$ _____ Per _____ SOURCE: _____
FINANCIAL INSTITUTION INFORMATION:	
Checking _____ Address _____ Phone: _____	
Savings _____ Address _____ Phone: _____	
Investment _____ Address _____ Phone: _____	

GUARANTOR FINANCIAL INFORMATION

CURRENT EMPLOYER:	ADDRESS:
CURRENT POSITION:	EMPLOYED SINCE:
SUPERVISOR:	PHONE NUMBER:
EMPLOYMENT INCOME: <input type="checkbox"/> Monthly <input type="checkbox"/> Yearly	OTHER INCOME \$ _____ Per _____ SOURCE: _____
FINANCIAL INSTITUTION INFORMATION:	
Checking _____ Address _____ Phone: _____	
Savings _____ Address _____ Phone: _____	
Investment _____ Address _____ Phone: _____	

CASE WORKER?	DEPARTMENT/AGENCY?	PHONE NUMBER	INCOME AMOUNT

PETS:	TYPE:	BREED:	FULL GROWN WEIGHT:
HAVE YOU EVER BEEN IN LANDLORD/TENANT LEGAL ACTION?		IF YES, EXPLAIN:	
HAVE YOU EVER BROKEN A LEASE?		IF YES, EXPLAIN:	
HAVE YOU EVER DECLARED BANKRUPTCY?		IF YES, EXPLAIN:	
HAVE YOU EVER BEEN CONVICTED OF A FELONY?		IF YES, EXPLAIN:	

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/her references must be satisfactory to the Landlord. Please be advised that the date on page one of the lease is not your move-in date. Your move-in date will be arranged with you after you have been approved.

No representations or agreements by agents, brokers or others are binding on the Landlord or Agent unless included in the written lease proposed to be executed.

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 related documents become the property of the Landlord, and will not be returned to me under any circumstances.

I authorize the Landlord, Agent and credit reporting agency 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, bank accounts, and all other information that the Landlord deems pertinent to my obtaining residency. I understand that I shall not be permitted to receive or review my application file or my credit consumer report. I authorize banks, financial institutions, landlords, business associates, credit bureaus, attorneys, accountants and other persons or institutions with whom I am acquainted to furnish any and all information regarding myself. This authorization also applies to any update reports which may be ordered as needed. A photocopy or fax of this authorization shall be accepted with the same authority as this original. I will present any other information required by the Landlord or Agent in connection with the lease contemplated herein.

I understand that the application fee is non-refundable.

The Civil Rights Act of 1968, as amended by the Fair Housing Amendments Act of 1988, prohibits discrimination in the rental of housing based on race, color, religion, sex, handicap, familial status or national origin. The Federal Agency, which administers compliance with this law, is the U.S. Department of Housing and Urban Development.

Signature _____

Date _____

Signature _____

Date _____

Signature _____

Date _____

