

Lafayette Towers Nelson Apartments, LLC, Rental Application -<u>Required Information/Documentation</u>

Please provide the following information for all persons who will be occupying the apartment and for those who will be responsible for paying the rent as well.

1. A \$20.00 money order (**per applicant**) made payable to Nelson Management Group for a full credit report/background check.

2. A copy of two (2) most recent tax returns.

3. Four (4) most recent pay stubs, pension letter, or social security award letter. If self-employed, verified letter from accountant and copy of schedule C.

4. Rent breakdown from your current Management Office (Last 12 Months). Last twelve (12) months canceled rent checks if you live in a private home.

5. Government Issued ID i.e. Driver's License or DMV ID card. Tenant(s) annual household income must be <u>40 TIMES THE MONTHLY RENT.</u>

Other items such as bank statements and letters verifying employment and salary are also helpful.

For any questions regarding the above you can contact Nancy Marzano (718) 997-9500 ext. 105

Lafayette Nelson Apartments, LLC participates in a New York City program preserving workforce housing. Due to this, certain income limits apply based on household size. There are two income tiers at the property. Please see below for the **MAXIMUM** income allowable for tenant households upon moving in to the property for each income tier.

	Maximum		<u>Maximum</u>
HH Size	Annual Income (120%)	<u>HH Size</u>	Annual Income (150%)
1	\$100,320	1	\$125,400
2	\$114,600	2	\$143,250
3	\$128,880	3	\$161,100
4	\$143,160	4	\$178,950
5	\$154,680	5	\$193,350
6	\$166,080	6	\$207,600

EQUAL HOUSING OPPORTUNITY



Nelson Management Group, Ltd.

118-35 Queens Boulevard Forest Hills, NY 11375 Voice: (718) 997-9500 Fax: (718) 997-1781

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Move in Information				
Property Description		Rental Building		
Deposit	One months rent _	Ren	ıt	
Contract Length	Move in Date	to be de	etermined	_
Applicant Information				
First name		Last name		
Social security number		Date of Birth		
Phone		Cell Phone		
License		Smoke?		
Co-Applicant Information				
First name		Last name		
Social security number		Date of Birth		
Phone		Cell Phone		
License		Smoke?		
Additional Occupants				
Name	Rel	ationship	Age	

Name	_ Relationship	_ Age
Name	_ Relationship	_ Age
Name	_ Relationship	_ Age
Name	_Relationship	_Age
Name	_Relationship	_Age



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We Do Bu	siness in Accordance With the Federal Fair Housing Law	I	
•	Fair Housing Amendments Act of 1988)		
Current Address			
Address			
City	State	Zip	
Manager	Manager Phone		
Start Date	End Date		
Reason for leaving			
Past Rental History			
Address			
City	State	Zip	
Manager	Manager Phone		
Start Date	End Date		
Reason for leaving			
Employment History			
Company			
Manager	Manager Phone		
Employment Length	Monthly Pay		
Co-Applicant Employment History			
Company			
Manager	Manager Phone		
Employment Length	Monthly Pay		



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Additional Income

	Amount	
Verify with?	Phone	
Bank Information		
Bank name	Account #	Amount
Bank name	Account #	Amount
Bank name	Account #	Amount
Bank name	Account #	Amount
	Relationship	Phone
Name	Relationship	Phone
Nomo	Polotionship	Phone
		Phone Phone
Name		Phone Phone
Name	Relationship	



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Additional Information

Have you ever been convicted of a crime? Describe and Date each one:

Have you ever been evicted or declared bankruptcy? Describe and Date each one:

(initials) I agree to the following statement – I represent that the information provided in this application is true, complete and accurate to the best of my knowledge. I understand that any misrepresentation or omission of information is grounds for eviction.

(initials) I agree to the following statement – I understand that the information provided might be used by Landlord to determine whether to accept this application. I authorize Landlord to verify all the information given in this application, including past rental information, personal references and employment information provided. I authorize the Landlord to obtain a current credit and criminal background check.

_____ (initials) I agree to the following statement – I understand that this application is not a rental agreement and that this application does not create any obligation on the Landlord.

The undersigned represent that the information provided in this application is true, complete, and accurate to the best of my knowledge. I understand that any misrepresentation or omission of information is grounds for eviction.

Signature_

Date_____

Date

Signature_____

PETS ARE NOT PERMITTED



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Storage AND/OR USE OF BBQ'S ARE NOT PERMITTED ON TERRACE

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