

GREENE 750 APPLICATION AND DOCUMENTATION CHECKLIST

Gene	ral Requirements:						
	Application – Please fill ou	t completely.					
	Statement of Rental Policy	(Signed by Tenant)					
	elease (To be completed by all tenants/occupants over age 18) – This gives us credit, criminal reports, and social security number						
	Valid and Verifiable Proof of Citizenship or Eligible Immigration Status Identification. i.e., Passport, or Drivers License, Social Security Card or ITIN#						
	Valid and Verifiable Proof	of Income. i.e, Copy of two most recent pay stubs, prior year's tax return, or offer letter					
	Permission To Release Inc	ome and Employment Verification – to be completed by your employer					
	Rental History Verification	Form - To be completed by current Landlord					
	Mortgage Contract of Sale if you have a mortgage and are selling your home						
	\$75 application processing fee (non-refundable) - Must be a Certified Bank Check or Money Order (PERSONAL CHECKS WILL NOT BE ACCEPTED) made out to American Properties @ Bear Tavern, LLC.						
After	Approval:						
	Application along with a <u>Ce</u> <u>Bear Tavern, LLC</u> in the an hold the unit. If for ANY re Management will refund 50	rting documents MUST be turned in within 14 days of approval of Rental ertified Bank Check or Money Order, made out to American Properties @ mount of \$1,000 as a deposit that will go towards your first months' rent and ason the tenant must break the lease prior to agreed upon move-in date, The 0% (\$500) of the deposit, as the remainder will be used as an Administrative fee.					
	Proof and/or Updated Vaccinations from Veterinarian for Cat/Dog						
	Proof of Spaying/Neutering for Cat/Dog						
		e attached application process. I/we understand that the processing can be applicant fails to meet the guidelines.					
Applicant's Signature		Applicant's Signature					
Applicant's Signature		Applicant's Signature					



STATEMENT OF RENTAL POLICY

We are an equal opportunity housing provider. We comply with the Federal Fair Housing Act and all applicable State housing laws. We do not discriminate against any person because of race, color, religion, sex, affectional or sexual orientation, disability, familial status, national origin, or source of income.

- 1. **Occupancy Guidelines**. Our occupancy standards are governed by the Township of Ewing, New Jersey.
- 2. **Rental Criteria**. To qualify for residency, you must meet the following criteria.
 - Income. Landlord requires income verification by receipt of the applicant's tax return for the year preceding the application and /or copies of the applicant's last two pay check stubs showing year to date income. If the applicant is retired or on social security documentation verifying this income will be required. If you do not meet the income requirements, a Cosigner or Cosigners will be required. A Cosigner should be able to afford their mortgage or rent along with your rent should you default on your account. Same credit history requirements apply as prospective tenant applying.
 - **Mortgage.** If you are selling a home and have a mortgage, we would require a fully executed copy of the Contract of Sale signed by both parties. This will enable us to accurately calculate the debt ratio based on the sale of the home.
 - **Rental history**. You must have a satisfactory rental history. If you have been evicted or have been sued for any lease violation, we will reject your application.
 - **Credit history**. Your credit record must be satisfactory. This means that any prior unpaid judgments or bankruptcies within two years prior to the application, or any unpaid credit accounts (excluding any unpaid accounts for medical services in an amount less than \$1000.00) will result in a denial of the application. If the credit report shows any accounts with habitual late payments (more than three (3) payments thirty (30) days late or more on any one account) or credit accounts closed by the creditor due to the applicants failure to pay in accordance with his agreement or which have been forwarded for collections within the last two years (excluding any unpaid accounts for medical services in an amount less than \$1000.00) this will also result in disqualification.
 - **Criminal history**. If you or any of your proposed occupants have ever been convicted of or plead guilty to a felony, (or in New Jersey a crime of the fourth degree or greater) we will reject you application. If you or any of your proposed occupants have been convicted of or plead guilty to a misdemeanor (or in New Jersey a disorderly persons offense) involving dishonesty, property damage, or violence within the past ten years, we will reject your application
- 3. **Application Process**. We evaluate every tenancy application in the following manner: You must sign an application form which confirms that you have read the application form which confirms that you have read the application instructions and you were advised of the new rent you will be charged. You must submit a rental application and answer all questions on the form.

Incomplete applications will be returned to the applicant. If they remain incomplete the application will be rejected.

In order for your application to be processed, you must pay a \$75.00 non-refundable application fee (includes credit check, criminal and social security check) for each application for tenancy that will live in the apartment. Once a completed application is received, we will then determine if you qualify for the tenancy. We will check your income and or credit history, employment and rental history to confirm that they meet our rental criteria and that they agree with our application.

If you meet our rental criteria, we will approve your application. The amount of time this process takes may vary depending upon the information required and the responsiveness of third parties to provide this information.

We will process an application only if proper identification for each person listed as a prospective tenant and resident is provided to the rental office. This includes a copy of the prospective residents' drivers' license.

I hereby acknowledge reading everything that has been typed above. I acknowledge that I understand it all, my questions have been answered by the Landlord's representative and I agree to comply with this application process. I acknowledge that if I find any of these requirements to objectionable, I have the right to seek housing elsewhere.

 (Signature)
(Print Name)
(Date)
(Signature)
 (Print Name)
 (Date)



APPLICATION FOR LEASE OF APARTMENT Green 750 @ Bear Tayern

Green 750 @ Bear Tavern 23 Wheldon Shivers Drive Ewing, NJ 08628

•
-Pet Building Y or N
-Pet Y or N
-Cat or Dog Pet Rent
- Garage Yor N
- Garage#
-Lease Term
-Incentives

Date:	Apt. No.: Floor: Type of Apt. Size: Monthly Rental Security: Length of LeaseYrsM From:To: Move-In Date:			Mos.	
<u>IN ORD</u>	ER TO RECEIVE PROMPT CONSIL	ERATION, THE	APPLICATON MU	ST BE FILLED IN	FULLY.
Name (print)					
Cell Phone #	Work Phone #	Email			
Present Address	Clty/ST		Zip		
Present Landlord		Phone No.			
How Long at Present Address	Present Rentor Pr	resent Mtg	Explanation_	·	*··
Name of Employer					
Address of Employer					
Length of Employment					
Driver's LIcense #	CarLI	cense Plate#		State	····
•	•				
Name (print)		<u> </u>		Age	process and the second
Cell Phone #					
Present Address					
Present Landlord					
How Long at Present Address					
Name of Employer		Position	ı Held		
Address of Employer	City_		Phone No.		_
Length of Employment	Annual Salary		Supervisor		•
Driver's License #					
How many will occupy premises: Ad					
List any Charge Accounts					
Name of Bank					
LIST ONE BUSINESS REFERENCE:					
	Phone }	No.:	•		•
List two persons who will always know		*			<u>.</u>
Name	•	Vo.			
Name					
applicant hereby represents that the above lard apartment lease, for the apartment a cation is accepted, I/we agree to sign a lease of damage. If I/we do not sign the lease	statements are true and are made to the rental and for the term as herein as as herein requested for this apartm	o Induce the landlo inabove specified.	rd to lease him/her i/we understand tha	an apartment. I/w	s subject to approval of the landlord, I

Signature of Applicant(s)

_(L.S.) _(L.S.)

Core- Logic Safe-Rent Landlord/Tenant Screening Service Tenant Release Form

The information on this page is to be completed by the prospective tenant(s) for the purposes of obtaining a rental lease.

(Please Print Clearly)

Applicant Name – First, Middle, Last	Social Security Number
Current Address - City, State, Zipcode	
Previous Address - City, State, Zipcode	Birth Date - MM/DD/YYYY
Work Phone Number Extension	Home Phone Number
Protect, a credit reporting agency, the right to p rental lease and/or the renewal of an existing leavith the FAIR CREDIT REPORTING ACT, this no includes but is not limited to making inquiries herein, including procuring consumer report information from other credit institutions a enforcement agencies. You have the right to make receive additional information about the nature	realtor, whichever is applicable, and its designee, Landlord process this credit application for the purpose of obtaining a asse based on the dates and terms of the lease. In compliance tice is to inform you that the processing of this application deemed necessary to verify the accuracy of the information its from consumer reporting agencies, obtaining credit and criminal background checks from appropriate law ake a written request within a reasonable period of time to be of this investigation. The undersigned agrees that this rement complex, landlord or realtor regardless if rental lease or renewed.

 $\frac{Consumer Relations@saferent.com}{888-333-2413}$

Thank you for choosing Safe-Rent

Core- Logic Safe-Rent Landlord/Tenant Screening Service Tenant Release Form

The information on this page is to be completed by the prospective tenant(s) for the purposes of obtaining a rental lease. (Please Print Clearly)

Applicant Name – First, Middle, Last Current Address - City, State, Zipcode Previous Address - City, State, Zipcode		Social Security Number		
			110000	
		Birth Date - MM/DD/YYYY		
Work Phone Number	Extension	Home Phone Number		
Protect, a credit reporting agent rental lease and/or the renewal with the FAIR CREDIT REPORT includes but is not limited to a herein, including procuring information from other creding enforcement agencies. You have receive additional information	cy, the right to post of an existing le ING ACT, this not taking inquiries consumer report it institutions are the right to making about the nature.	realtor, whichever is applicable, and its design process this credit application for the purpose of asse based on the dates and terms of the lease. In otice is to inform you that the processing of this deemed necessary to verify the accuracy of the rts from consumer reporting agencies, obtained criminal background checks from approake a written request within a reasonable perior of this investigation. The undersigned agreement complex, landlord or realtor regardless in	f obtaining a a compliance s application information ining credit opriate law od of time to sees that this	

 $\frac{Consumer Relations@saferent.com}{888\text{-}333\text{-}2413}$

(Date)

(Applicant Signature)

Thank you for choosing Safe-Rent

PERMISSION TO RELEASE INCOME AND EMPLOYMENT VERIFICATION

Name:		·		
Home Address:			-	•
City: S	tate:Z	ip:		
Home Ph:C	ell Ph:			
I,, he American Properties Real	reby grant permission ty, Inc. 517 Route One So	to release income a outh, Iselin, New Jersey	nd employment ver 08830.	rification to Green 750 C/O
Please fax this completed	and signed verification	ı to: 609-403-6883.		
	THIS SECTION TO) BE COMPLETED BY Y	OUR EMPLOYER	
Employee Name	Jol	bTitle		
Presently Employed Ye	s Date			
Current Wages/Salary \$_	(circle one)	hourly weekly	bi-weekly	
semi-monthly monthly	yearly other			
Average # of regular hour	rs per weekY	ear-to-date earnings \$	thro	ough/
Overtime Rate \$	per hour Average # of o	vertime hours per wee	ek	
Commissions, bonuses, ti	ps, other \$ ((circle one) hourly	weekly	
bi-weekly semi	-monthly monthly y	early other		
List any anticipated chan date	ge in the employee's rat	te of pay within the ne	xt 12 months	Effective
Company Name				
Signature		Date		
Print Name/Title _	•	Tel. #		

PERMISSION TO RELEASE INCOME AND EMPLOYMENT VERIFICATION

Name:
Home Address:
City: State: Zip:
Home Ph:Cell Ph:
I,, hereby grant permission to release income and employment verification to Green 750 C/O American Properties Realty, Inc. 517 Route One South, Iselin, New Jersey 08830.
Please fax this completed and signed verification to: 609-403-6883.
THIS SECTION TO BE COMPLETED BY YOUR EMPLOYER
Employee NameJobTitle
Presently Employed Yes Date
Current Wages/Salary \$ (circle one) hourly weekly bi-weekly
semi-monthly monthly yearly other
Average # of regular hours per week Year-to-date earnings \$ through/
Overtime Rate \$ per hour Average # of overtime hours per week
Commissions, bonuses, tips, other \$ (circle one) hourly weekly
bi-weekly semi-monthly monthly yearly other
List any anticipated change in the employee's rate of pay within the next 12 months Effective date
Company Name
Signature Date
Print Name/Title Tel. #



GREENE 750 @ BEAR TAVERN RENTAL VERIFICATION FORM

I hereby authorize the release of my rental information GREENE 750 c/o American Properties Realty, Inc.

Fax Form to Leasing Staff @ 609-403-6883 Applicants Name Signature Date Do Not Write Below This Line - TO BE COMPLETED BY LANDLORD Tenant's Name: ______ Date: _____ Address: (Number/Street) (Apt. #) (City) (State) Number of Household Members: List of Household Members: Occupancy date: _____ Security Deposit: \$_____ Date paid: ____ Rent amount: \$_____paid monthly weekly other_____ If subsidized rent, please list tenant portion: \$_____ Rent Includes: All utilities No Utilities Hot Water Heat Electric Date last rent was paid: _____ Amount Paid: \$_____ Landlord's Name/ Telephone______Fax Number______ Landlord's Address Name of Manager or other Representative_____

Landlord Signature______Date_____