The Residences At CARNEVALE PLAZA

RENTAL APPLICATION

All adults, 18 years and older must complete an application and submit it with the application fee of $50.00.

Please type or print clearly.

Requested Move-in Date: ____/____/_____ Number of Adults: _____ Children under 18: _____

Apt. Preference: #1_____ Base Rent: _____ **Apt. Preference: #2**_____ Base Rent: _____

Applications are reviewed and scored by National Tenant Network (NTN). The information provided is verified through various sources included but not limited to the applicant's credit report, employment, income, and mortgage payment and/or rental history.

SECTION 1: TENANT AND OCCUPANTS

TENANT' NAME _____ DOB _____

Email _____ Home Phone _____ CELL _____

Driver's License Number _____ State: _____ Exp Date _____

Social Security Number: _____ Visa # _____ Exp Date_____

OCCUPANTS: *(Fully completed applications required for Occupants 18 years and older)*

Name:_____Relationship:_____Age _____

Name:_____Relationship:_____Age _____

Name:_____Relationship:_____Age _____

EMERGENCY CONTACT _____ **Relationship** _____ **Cell** _____

PROPOSED PETS: (Please submit a photograph of each pet with pet application.)

Name_____Type:_____ Breed:_____Weight: _____

Name_____Type:_____ Breed:_____Weight: _____

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SECTION 2: HOUSING HISTORY

Current Address:_____City_____State_____Zip: _____

Monthly Rent $_____ Monthly Mortgage $_____ Lease/Mortgage Start Date _____

Landlord/Mortgage Company:_____ Phone: _____

Reason for moving: _____

If less than 5 years at above address:

Previous Address:_____City_____State_____Zip: _____

Monthly Rent $_____ Monthly Mortgage $_____ Number of years at this address: _____

Landlord/Mortgage Company:_____Phone: _____

Reason for moving:_____Move-out Date: _____

Have you ever been evicted? ____ Yes ____ No If yes, reason for eviction:

Are you subject a state sex offender registry, lifetime registration requirement? ___ Yes ___ No

SECTION 3: EMPLOYMENT HISTORY

Current Employer:_____ Supervisor: _____

Address:_____ City, State, Zip: _____

Work Phone:_____ Position: _____

Start Date:_____ End Date:_____ Gross Monthly Income: $_____

If less than 5 years at above employment:

Previous Employer: _____ Supervisor: _____

Address:_____ City, State, Zip: _____

Work Phone:_____ Position: _____

Start Date:_____ End Date:_____ Gross Monthly Income: $_____

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SECTION 4: INCOME/EXPENSES

ANNUAL INCOME:

Gross Salary/Wages: _____ $_____

Other Income Source:_____ $_____

Other Income Source: _____ $_____

Child Support Receiving $ _____

Total Annual Income: $ _____

ANNUAL EXPENSES:

Auto: _____ $_____

Credit Cards: _____ $_____

Other: _____ $_____

Other: _____ $_____

Child Support Payments: $ _____

Total Annual Expenses: $ _____

SECTION 5: BANKING/INVESTMENT/SAVINGS INFORMATION

Financial Institution	Account Number	Current Balance/Value	Annual Interest Earned
_____		$ _____	$_____
_____		$ _____	$_____
_____		$ _____	$_____

Total Projected Annual Interest/Income (from this section): $_____

SECTION 6: ADDITIONAL INFORMATION

1. Have you claimed bankruptcy within the last 7 years? If Yes, what year? _____
   If yes, explain: _____

SECTION 7: OPTIONS

PARKING SPACES: OPEN PERMIT (*$75.00) ____ RESERVED PERMIT (*$125.00) _____

STORAGE INTERIOR ($125.00) _____ STORAGE EXTERIOR _____

**Per vehicle, per month*

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SECTION 8: AUTHORIZATION TO VERIFY INFORMATION

I understand and agree that the above information will be verified by 255 Nassau Corp. by and through its agents or employees, by obtaining a credit report, and any other reports deemed necessary by 255 Nassau Corp. I authorize 255 Nassau Corp., by and through its agents or employees, to obtain and verify all credit and rental history information for the purpose of determining whether to lease an apartment to the applicant.

I certify that all the information contained in this Application is true, correct and complete and acknowledge that providing false information is cause to be rejected as an Applicant, Tenant and/or may result in eviction.

Applicant acknowledges that:

a. The Application Fee is a nonrefundable payment for the processing of this Application. and must be submitted with the fully completed and signed application.
b. The Application Fee is not a rental payment or security deposit.
c. The Application understands that Referrals Only, Inc. ("Manager") and Leasing Agents are working on behalf of the property Owner and they are fiduciarily responsible to the Owner in all matters relating to the property in which your apartment is located. An Agency relationship exists between the Manger and Owner.
d. The Manager and Owner operates this property in full compliance with all applicable Fair Housing Laws including, Fair Chance in Housing Act, N.J.S.A. 46:8-52 to 64, (FCHA) and the accompanying rules, N.J.A.C. 13:5. If you believe that any owner, agent, employee, or designee of Owner, Manager, or their Agents has violated any of the above requirements, you may contact the New Jersey Division on Civil Rights at www.NJCivilRights.gov 1-866-405-3050.

SPECIAL REQUIREMENTS OR COMMENTS:

_____

_____

APPLICANT SIGNATURE: _____ **DATE:** _____

OFFICE ONLY:

	Dates
Application and Fee Received:	_____
NTN Review Completed:	_____
Date Applicant Emailed Notification:	_____

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