

## Nationwide Applicant Screening

Fax completed form to: 212-481-8117

Management Company \_\_\_\_\_ Attention \_\_\_\_\_

Building Address Applying For \_\_\_\_\_ Apt# \_\_\_\_\_

Name of Applicant \_\_\_\_\_ Social Security # \_\_\_\_\_

Date of Birth \_\_\_\_\_ Home Telephone # \_\_\_\_\_

Marital Status \_\_\_\_\_ Spouses Name \_\_\_\_\_ Number of Dependents \_\_\_\_\_

Age &amp; Name of Dependents \_\_\_\_\_ are they moving with you? \_\_\_\_\_

Current Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Length of Residency \_\_\_\_\_ Monthly Rent \$ \_\_\_\_\_ Mortgage \$ \_\_\_\_\_ Maintenance \$ \_\_\_\_\_ Share \$ \_\_\_\_\_

Current residence is a HOME \_\_\_\_\_ Co-op \_\_\_\_\_ CONDO \_\_\_\_\_ RENTAL \_\_\_\_\_ SUBLET \_\_\_\_\_ SHARE \_\_\_\_\_

Are you selling your current residence? Yes \_\_\_\_\_ No \_\_\_\_\_ Price you sold for \$ \_\_\_\_\_ Date you are selling \_\_\_\_\_

Landlords Name \_\_\_\_\_ Landlords Address \_\_\_\_\_

Landlords Tel # \_\_\_\_\_ Contact \_\_\_\_\_ Fax # \_\_\_\_\_

Moved In \_\_\_\_\_ Lease Expires \_\_\_\_\_

Do you own real estate elsewhere? Yes \_\_\_\_\_ No \_\_\_\_\_ if yes state location &amp; value \_\_\_\_\_

Are you receiving Social Security \_\_\_\_\_ \$ Per Month \_\_\_\_\_ Pension \_\_\_\_\_ Per Month \$ \_\_\_\_\_ Govt.Assistance \_\_\_\_\_ Per Month \$ \_\_\_\_\_

Current Employer \_\_\_\_\_ Address \_\_\_\_\_

Position \_\_\_\_\_ Date Of Hire \_\_\_\_\_ Office Tel # \_\_\_\_\_

Annual Salary \$ \_\_\_\_\_ Bonus \$ \_\_\_\_\_ Commissions \$ \_\_\_\_\_ Other \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Tel # \_\_\_\_\_

Name of your bank \_\_\_\_\_ Address \_\_\_\_\_

Name of your Bank Officer \_\_\_\_\_ Tel # \_\_\_\_\_

Checking Account # \_\_\_\_\_ Balance \$ \_\_\_\_\_ Savings Account # \_\_\_\_\_ Balance \$ \_\_\_\_\_

Additional bank \_\_\_\_\_ Address \_\_\_\_\_

Name of your Bank Officer \_\_\_\_\_ Tel # \_\_\_\_\_

Checking Account # \_\_\_\_\_ Balance \$ \_\_\_\_\_ Savings Account # \_\_\_\_\_ Balance \$ \_\_\_\_\_

Other income Trust Fund \_\_\_\_\_ Value \$ \_\_\_\_\_ Alimony \_\_\_\_\_ Per Year \$ \_\_\_\_\_

IF SELF EMPLOYED PLEASE FILL OUT ALL QUESTIONS BELOW AND NOTIFY REFERENCES TO RELEASE INFORMATION TO CREDITFACTS.

Name of Business \_\_\_\_\_ Type of Business \_\_\_\_\_ Company Started \_\_\_\_\_

Federal Tax ID # \_\_\_\_\_ Bank Name \_\_\_\_\_

Bank Tel # \_\_\_\_\_ Address \_\_\_\_\_ Checking # \_\_\_\_\_ Balance \$ \_\_\_\_\_

Address \_\_\_\_\_ Income Per Year \$ \_\_\_\_\_ Tel # \_\_\_\_\_

Accountant \_\_\_\_\_ Address \_\_\_\_\_ Tel# \_\_\_\_\_

Attorney \_\_\_\_\_ Address \_\_\_\_\_ Tel # \_\_\_\_\_

Broker or Financial Advisor \_\_\_\_\_ TEL # \_\_\_\_\_

Account Numbers \_\_\_\_\_ Value of Portfolio \_\_\_\_\_

I hereby authorize Creditfacts Inc. to conduct inquiries concerning my credit history, employment, bank account balances and Landlord references for the purpose of my application for the apartment I am applying for. I also give this information to be released to Creditfacts Inc.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_