PENMARK REALTY CORP.
820 Second Avenue, New York, NY 10017
Ph 646-485-6129 Fax 609-482-6129
ATTN: CLAUDIA TURBIDES

APARTMENT RENTAL APPLICATION

APARTMENT YOU ARE APPLYING FOR:

Address:		Apt. #:
Lease Length:	Start Date:	End Date:
Rent per Month:		Security:
Number of Adults:	No. of Children:	Pets:

APPLICANT INFORMATION:

First Name:	Last Name:	Middle Init:
Date of Birth:	SS#:	
Present Address:		
City:	State:	Zip:
Home Phone:	Email:	

EMPLOYMENT INFORMATION:

Employer:		
Address:		
City:	State:	Zip:
Phone:	Fax:	
Position:	How long in current position:	
Salary:	Other Income:	Total Income:
Previous Employer:	Phone:	
Position:	How long in previous position:	

ACCOUNT INFORMATION:

Bank:	Branch:
Account Number:	Major Credit Cards:
Business Reference:	Phone:

ALL APPLICATIONS ARE SUBJECT TO A $50.00 NON-REFUNDABLE CREDIT CHECK FEE PAYABLE TO **FRIEDMAN MANAGEMENT CO.**

I UNDERSTAND THAT THE LANDLORD ASSUMES NO RESPONSIBILITY TO THE APPLICANT FOR DELAY IN GIVING POSSESSION, DUE TO FAILURE OF PRESENT OCCUPANT TO VACATE AT THE TERMINATION OF THE LEASE, OR FOR ANY OTHER REASON, EXCEPT THAT THE APPLICANT WILL BE CREDITED WITH AN ALLOWANCE EQUAL TO THE DAILY AMOUNT OF RENT, MULTIPLIED BY THE ACTUAL NUMBER OF DAYS FOR WHICH POSSESSION CANNOT BE GIVEN, AND THE TENANT AGREES TO ACCEPT THE LEASE SUBJECT TO SUCH CONDITIONS.

I HEREBY AUTHORIZE PENMARK REALTY CORP. TO CONDUCT INQUIRIES AND OR CREDIT REPORTS TO VERIFY ALL INFORMATION PROVIDED.

_____ _____
Applicant Signature **Date**

_____ _____
Applicant Signature **Date**