



Carnegie Hill Properties, LLC

154 West 70th Street | Suite 200 | New York, NY 10023
T | 212.308.0030 F | 646.695.1365 W | carnegiehillprop.com

LEASE PURCHASE (PLEASE CHECK ONE)

APARTMENT DATA			
Building Address:		Apt #:	Monthly Rent:
Today's Date:	Lease Date:	Lease Term:	
APPLICANT NAME			
First Name:	Middle:	Last:	DOB:
Telephone-Work:	Home:	Social Security No:	
Tenant:		Co-Tenant(s):	
Guarantor:		Co-Guarantor(s):	
OTHER OCCUPANTS	RELATIONSHIP	AGE	
1.			
2.			
Do you have pets: Yes ___ No	Please Specify:		
Emergency Contact:		Phone:	
RESIDENTIAL HISTORY			
Current Address:		Apt:	
City:	State:	Zip:	
Length of Time:	Landlord/Mortgage Holder:		
Landlord Telephone:		Monthly Payment:	
COMPLETE IF CURRENT ADDRESS IS LESS THAN TWO YEARS			
Address:		Apt:	
City:	State:	Zip:	
Length of time:	Landlord/Mortgage Holder:		
Landlord Telephone:		Monthly Payment:	
EMPLOYMENT INFORMATION*			
Employer:		How Long:	
Employer's Address:			
Human Resources/Supervisor:		Telephone:	
Position Held:	Annual Income:	Bonus:	
COMPLETE IF CURRENT EMPLOYMENT IS LESS THAN TWO YEARS			
Employer:		How Long:	



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Employer's Address:		
Human Resources/Supervisor:		Telephone:
Position Held:	Annual Income:	Bonus:
ADDITIONAL INFORMATION		
Interest, Dividends, Real Estate, Etc:		
FINANCIAL INFORMATION		
Bank:		
Branch Address:		
Bank Officer:		Bank Telephone:
Account Number:		Checking ___ Savings ___ Securities ___ (Please check appropriate a/c)
Bank:		
Branch Address:		
Bank Officer:		Bank Telephone:
Account Number:		Checking ___ Savings ___ Securities ___ (Please check appropriate a/c)
REFERENCES		
Attorney (If applicable):		Telephone:
Accountant (If applicable):		Telephone:
<p>I hereby authorize The Credential Researchers, Ltd., the Leasing Manager, landlord for building and Carnegie Hill Properties LLC to obtain a consumer credit report on me and to verify any information on this application with regard to my employment history, current and prior tenancies and all other information that the management company deems pertinent to my obtaining residency and to release such information to the owner/landlord/agent set forth above. Information contained in the following report is strictly confidential, may not be divulged to the subject of this report, or to any other person and is intended for the exclusive use of its inquirer. This report contains information compiled from sources believed to be reliable but the accuracy of which cannot be guaranteed. The inquirer agrees to hold all information contained herein in strict confidence and The Credential Researchers Ltd. shall not be held liable for any damages arising out of any improper use of this information.</p> <p>Processing Fee: _____ Date: _____ Signature: _____</p>		

***Please note: If your company will verify employment and salary only through one of the automated systems (which charge about \$18.00 per minute) please obtain the verification yourself and fax it to us.**

AUTHORIZATION TO RELEASE RECORDS

LANDLORD:

TO: _____



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(Company Name)

(Contact/Title)

(Phone Number)

(Fax Number)

EMPLOYER:

TO:

(Company Name)

(Contact/Title)

(Phone Number)

(Fax Number)

BANK:

TO:

(Bank Name)

(Contact/Title)

(Phone Number)

(Fax Number)

ACCOUNTANT: (if applicable i.e. if self-employed or have income in addition to your salary, etc.)

TO:

(Name)

(Phone)

ATTORNEY: (if applicable)

(Name)

(Phone)

I authorize the above referenced individuals and/or institutions to verify any and all requested information and, when necessary, to provide written backup to the Credential Researchers, Ltd.

Applicant Name: _____

(Please Print)

Applicant Signature: _____

Please Note: To expedite your application process, please fill in the above information and advise these parties that The Credential Researchers, Ltd. will be contacting them. Please indicate the importance of a prompt response. Thank you.