

APARTMENT OR SRO APPLICATION

The application information provided by the prospective tenant or tenants may be used to obtain a tenant screening report. The name and address of the consumer reporting agency or agencies which will be used to obtain such report:

Core Logic Saferent c/o Consumer Relations
Department
7300 West more Road, Suite 3, Rockville, MD.
20850-5223
Automated Request Phone: 888-333-2413

Pursuant to federal & state law:

(1) if the person requesting the information takes adverse action against a prospective tenant or tenants on the basis of information contained in a tenant screening report, such person must notify the tenant that such action was taken and supply the name and address of the consumer reporting agency that provided the tenant screening report on the basis of which such action was taken;

(2) any prospective tenant against whom adverse action was taken based on information contained in a tenant screening report has the right to inspect and receive a free copy of such report by contacting the consumer reporting agency;

(3) every tenant or prospective tenant is entitled to one free tenant screening report from each national consumer reporting agency annually, in addition to a credit report that should be obtained from www.annualcreditreport.com ; and

(4) every tenant or prospective tenant may dispute inaccurate or incorrect information contained in a tenant screening report directly with the consumer reporting agency.

Applicant:

First	Middle	Last
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Telephone:

Home	Business	Cell
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Present Address: _____

Referral Agency: _____

Contact: _____

Current Landlord's Name: _____

Landlord Contact: _____

Present/Last Rent: _____ Lease Expires/d: _____

Social Security Number: _____

Employer: _____

Address: _____

Telephone: _____

Salary: _____ per ___ week ___ month ___ year
(provide 4 current paystubs as well as a copy of your last tax return)

Additional Income: _____
Amount/Source

Emergency Contacts:

Name: _____ Tel#: _____

Name: _____ Tel #: _____



Banana Kelly Community Improvement Association, Inc.
863 Prospect Avenue
Bronx N.Y 10459
Tel: 718-328-1064
Fax: 718-991-3242

Documents that should be attached to the application:

1. Birth certificate for each member of the family that will be moving with you to the apartment you are applying for
2. Social security cards for every family member that will be moving with you
3. Proof of income (last 4 paystubs, SSI, SSD award letter, pension letter, letter from employer, PA Budget letter, Child support Award letter, Unemployment benefits letter)
4. 1040 forms and W2 for all working family members
5. Proof of present address (Utility bill)
6. ID for every family member 18 years old and over who will be moving with you
- \$20 Money order (Payable to Banana Kelly CIA Inc.)

Unit size requested (select one) SRO 1 bedroom 2 bedrooms 3 Bedrooms
 4 Bedrooms 5 Bedrooms

The application with the attached documents must be returned in person to:

Banana Kelly Community Improvement Association Inc
863 Prospect Avenue
Bronx NY 10459

Documentos que deben estar acompañados con la solicitud de apartamentos:

1. Certificados de nacimiento para cada miembro de familia que se mudaran con usted en el apartamento que usted esta solicitando
2. Tarjetas de seguro social para cada miembro de la familia que se mudaran contigo
3. Comprobante de ingreso (ultimos 4 talones de pago, Carta de SSI, carta de SSD, carta de pensiones, carta de empleador, carta de asistencia publica, carta de apoyo infantil, carta de beneficios de desempleo)
4. Formas 1040 y W2 para todos los miembros de familia que trabajan
5. Comprobante de domicilio actual (Facturas de servicios publicos)
6. Identificacion para todos los miembros de familia de 18 años y mas
- \$20 giro Postal (A nombre de Banana Kelly CIA Inc)

Tamaño de unidad solicitado (Seleccione uno) SRO 1 Habitaciones 2 Habitaciones 3 Habitaciones 4 Habitaciones 5 Habitaciones

la solicitud con los documentos adjuntos debe ser devuelta en persona

Banana Kelly Community Improvement Association Inc
863 Prospect Avenue
Bronx NY 10459

NOTICE OF DISCLOSURE

The application information provided by you may be used to obtain a tenant screening report.

Pursuant to local NYC law

1. If we take adverse action against you on the basis of information contained in the tenant screening report, we must notify you that such action was taken and supply you with the name and address of the consumer reporting agency that provided the tenant screening report on the basis of which such action was taken.
2. If any adverse action is taken against you based on information contained in a tenant screening report you have the right to inspect and receive a free copy of that report by contacting the Consumer Reporting Agency at:

*CoreLogic SafeRent c/o Consumer Relations Department
7300 Westmore Road, Suite 3 Rockville, MD 20850-5223
Automated Request Phone #338.333.2413*

3. Every tenant or prospective tenant is entitled to one free consumer report from each National Consumer Reporting Agency on an annual basis. This report can be obtained through www.annualcreditreport.com
4. Every tenant or prospective tenant may dispute inaccurate or incorrect information contained in a tenant screening report directly with the Consumer Reporting Agency that provided such report

Authorization

I hereby authorize Banana Kelly Community Improvement Association Inc. to obtain consumer reports and any other information it deems necessary, for the purpose of evaluating my application. I understand that such information may include, but is not limited to credit history, rental history, civil and criminal information, employment /income verification and/or any other necessary information. I understand that subsequent consumer reports may be obtained and utilized under this authorization in connection with an update, renewal, extension or collection with respect to or in connection with, the rental or lease of a residence for which a application was made. I agree to hold the above named company and procurar or furnishing of such information. I understand that any false statements/representations made in this application may be used as termination of a application lease.

Applicant Name: _____

Applicant Signature: _____

APPLICATION

Applicant _____
First Middle Last

Telephone _____
Home Business Cell

Present Address _____

Landlord's Name _____

Landlord's Telephone _____

Present Rent _____

Social Security Number _____

Employer _____

Address _____ Telephone _____

Annual Salary _____ Please provide 4 current paystubs as well as a copy of your last tax return

Additional income _____
Amount/source

Emergency Contacts:

Name: _____ Telephone # _____

Name: _____ Telephone # _____

Co-Applicant _____
First Middle Last

Telephone _____
Home Business Cell

Present Address _____

Landlord's Name _____

Landlord's Telephone# _____

Present Rent amount _____

Social Security Number _____

Present Employer _____
Name

Address _____ Telephone Number _____

Annual Salary _____ Please provide 2 current pay stubs as well as a copy of
your last tax return

Additional income _____
Amount/Source

Emergency Contacts:

Name: _____ Telephone _____

Name: _____ Telephone _____

Occupancy: Please list all persons (including applicants) who will live in the apartment:

Name	Relationship	Date of Birth
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____

Please provide copies of social security cards for all occupants and copies of government issued picture identification for all occupants over 18.

Do you have pet's _____

Do you have a washing machine _____

Do you have a dishwasher _____

Do you have a clothes dryer _____

Are you presently receiving assistance under section 8 housing certificate or voucher? (This information will not affect the processing of this application) _____

Do you have relatives / friends presently residing in the complex _____

Name _____ Address _____

Name _____ Address _____

Additional Information _____

IN CONNECTION WITH THIS REQUEST, I AUTHORIZE ALL CORPORATIONS, COMPANIES, CREDIT AGENCIES, AND FORMER EMPLOYERS TO RELEASE INFORMATION THEY MAY HAVE ABOUT ME AND RELEASE THEM FROM ANY LIABILITY AND RESPONSIBILITY FROM DOING SO; FURTHER I AUTHORIZE THE PROCUREMENT OF AN INVESTIGATIVE CONSUMER REPORT AND UNDERSTAND THAT SUCH REPORT MAY CONTAIN INFORMATION AS TO MY BACKGROUND, MODE OF LIVING, CHARACTER AND PERSONAL REPUTATION. FURTHER INFORMATION MAY BE AVAILABLE UPON WRITTEN REQUEST WITHIN A REASONABLE PERIOD OF TIME.

Signature of applicant

Social Security #

Date

Signature of Co-Applicant

Social Security #

Date

Signature of Adult Household Members

Social Security #

Date

Signature of Adult Household Members

Social Security #

Date