

ATA ENTERPRISES

800 Third Avenue, New York, NY 10022

Tel. 212-308-1888 Fax 212-308-8893

RESIDENTIAL APARTMENT APPLICATION: Broker _____ Date _____
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Building Address: _____ Apartment # _____ Size _____

Length of Lease _____ To Commence _____ To Expire _____

Monthly Rent \$ _____ Security \$ _____ Annual Rent\$ _____
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Applicant's Name _____ Birthdate _____ SS# _____

Present Address _____ Apartment # _____

Home Phone # _____ Cellular Phone # _____ Monthly Rent \$ _____ Term _____ yr(s)

Present Landlord _____ Phone # _____

Previous Address _____ Apartment # _____

Landlord's Phone # _____ Monthly Rent \$ _____ Term _____ yr(s)
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Marital Status _____ Maiden Name _____ Spouse _____

Names of Children to occupy apartment _____

Others sharing apartment-Name(s) _____ Relationship _____

Driver's License # _____ State of issue _____
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Present Employer _____ Annual income \$ _____

Nature of Business _____ Position held _____ How long _____

Business Address _____ Phone # _____

Business Reference (Department Head) _____ Phone # _____

Additional sources of income _____

If self-employed, please specify person(s) able to verify the above information:

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Checking Account (Branch) _____ Account # _____

Savings Account (Branch) _____ Account # _____

Credit Cards (specify two & Nos.) _____
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Attorney _____ Address: _____ Phone # _____

Accountant _____ Address: _____ Phone # _____

In case of emergency, notify (nearest relative): _____

Relationship _____ Address _____ Phone # _____
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UPON SIGNING THIS APPLICATION, IT IS AGREED AND UNDERSTOOD THAT **NO PETS WILL BE KEPT IN THIS BUILDING. A \$75.00 NON-REFUNDABLE FEE IS DUE WITH THIS APPLICATION.**

I hereby authorize verification of all above information by ATA Enterprises including my credit, rental, check writing and employment.

DATE _____

APPLICANT'S SIGNATURE