

ABELES BUILDING

RENTAL APPLICATION

CHECKLIST

Please note that all steps must be completed for an application to be processed.

☐ #1. Invitation to Complete Application

We require that a prospective resident be matched to an available unit before an application is accepted. Please make sure to contact the Abeles Building at 585-271-8028 or Elmwood@KonarProperties.com to confirm availability of the unit type you desire before completing the application process.

☐ #2. Completed Application/s (one for each individual 18+ years of age)

An application is required for every individual (18 and older) who intends to reside at the Abeles Building. This may be faxed to 585-473-4995, emailed to Elmwood@KonarProperties.com, or mailed to our off-site leasing office at c/o Elmwood Manor 32-9 Lilac Drive, Rochester, NY 14620. An online version of the application is also available and will be electronically delivered to our leasing office upon submission.

☐ #3. Proof of Income

Proof of sufficient lawful income is required and can be in the form of paystubs; a signed letter from an employer; vouchers or other official documentation verifying federal, state, or local housing assistance; official documentation verifying other lawful sources of income such as child support, alimony, foster care subsidies, social security, or Supplement Security Income. Depending on the documentation, additional verification may be required (such as a supervisor's phone number to verify a job offer, for example). If, for any reason, the applicant is unable to provide proof of sufficient lawful income, a cosigner will be required (see below). Please email to Elmwood@KonarProperties.com, fax to 585-473-4995, or mail a copy to our off-site leasing office at c/o Elmwood Manor 32-9 Lilac Drive, Rochester, NY 14620.

☐ #4. Photo ID

A driver's license or other government- or college-issued photo ID must be presented to the Abeles Building's leasing staff, or emailed to Elmwood@KonarProperties.com.

☐ #5. Social Security Number

For security purposes, please call our leasing office at 585-271-8028 to share your social security number.

☐ #6. Security Deposit

A money order or certified bank check payable to the Abeles Building are the only accepted forms of payment. Deposits should be mailed or personally delivered to our off-site leasing office c/o Elmwood Manor 32-9 Lilac Drive, Rochester, NY 14620, and received within 48 hours of application submission.

☐ #7. Cosigner's Application (if applicable)

If someone is financially responsible for your lease and not living with you at the Abeles Building, they are a cosigner/guarantor, and are required to complete the following sections: Parts A1, C, G, and H.

HOW DID YOU HEAR ABOUT US?

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> Apartments.com | <input type="checkbox"/> ApartmentFinder.com | <input type="checkbox"/> ApartmentGuide.com | <input type="checkbox"/> RentRochester.com |
| <input type="checkbox"/> FrontierPages.com | <input type="checkbox"/> Craigslist.org | <input type="checkbox"/> General search lead to property website | <input type="checkbox"/> Yellow Pages |
| <input type="checkbox"/> Other online source | <input type="checkbox"/> CITY Newspaper/ special editions | <input type="checkbox"/> Democrat & Chronicle | <input type="checkbox"/> Drove by |
| <input type="checkbox"/> UR Parent Guide | | | |
| <input type="checkbox"/> Other (Please Specify): _____ | | | |

ABELES BUILDING

RENTAL APPLICATION

PAGE 1

FOR OFFICE USE ONLY

Date: ____/____/____

Address: _____ Unit #: _____ Tenant #: _____

Move-in date: ____/____/____

Rent: _____ Pet rent: _____ Prorate: _____

Landlord Reference

#1 Sent: _____ Received: _____

#2 Sent: _____ Received: _____

Payment of \$: _____ Received by: _____ Date: ____/____/____

Rental Application received by (name): _____ Date: ____/____/____

Comments: _____

Rental Application: ☐ Approved ☐ Not approved

By (name): _____

If not approved, specify reason(s): _____

Applicant notified by (name): _____

Method: ☐ Letter (attach copy) ☐ Phone ☐ In person ☐ Email

PART A1: APPLICANT INFORMATION

☐ I am a resident. ☐ I am the cosigner/guarantor (complete this section, as well as Parts C, G, and H).

First name: _____ Middle initial: _____ Last name: _____

Date of birth: ____/____/____

Last four digits of social security number*: _____

**Please call the leasing office at 585-271-8028 to share your full social security number.*

Best daytime phone number: (_____) _____ - _____ ☐ Home ☐ Work ☐ Mobile

Email: _____

Current Address

Street address: _____ Apartment #: _____

City: _____ State: _____ ZIP: _____

Month & year moved in: _____ Monthly payment: _____

Reason for leaving: _____

Name of building/community (write N/A if not applicable): _____

Name of owner or agent: _____ Phone number: (_____) _____ - _____

ABELES BUILDING

RENTAL APPLICATION PAGE 2

PART A2: CO-APPLICANT INFORMATION (IF APPLICABLE)

Please list any individual 18+ years of age who will live with you at the Abeles Building. These are your co-applicants, and each person listed is required to complete *their own separate application*.

Co-Applicant #1

First name: _____ Middle initial: _____ Last name: _____

Phone number: (_____) _____ - _____

Email: _____

Co-Applicant #2

First name: _____ Middle initial: _____ Last name: _____

Phone number: (_____) _____ - _____

Email: _____

Co-Applicant #3

First name: _____ Middle initial: _____ Last name: _____

Phone number: (_____) _____ - _____

Email: _____

PART A3: MINORS (IF APPLICABLE)

Please list any individuals under 18 years of age (minors) who will be living with you at the Abeles Building.

Name: _____ Relationship: _____ Date of birth: _____/_____/_____

Name: _____ Relationship: _____ Date of birth: _____/_____/_____

Name: _____ Relationship: _____ Date of birth: _____/_____/_____

PART A4: COSIGNER/ GUARANTOR

If the person financially responsible for rent is different than the applicant or co-applicants, please name a cosigner/guarantor below. Your cosigner/guarantor is required to complete their own separate application.

☐ Either I or my co-applicant/s are financially responsible for my lease.

Leave this section blank and skip ahead to Part B.

First name: _____ Middle initial: _____ Last name: _____

Phone number: (_____) _____ - _____

Email: _____

ABELES BUILDING

RENTAL APPLICATION

PAGE 3

PART B: RESIDENCE HISTORY

☐ I've lived at my current address for fewer than three years.

☐ I've lived at my current address for at least three years.

Leave this section blank and skip ahead to Part C.

☐ I've lived with my co-applicant (listed in Part A2) for at least three years, and our shared address history is provided on their application.

Leave this section blank and skip ahead to Part C.

Previous Address #1

Street address: _____ Apartment #: _____

City: _____ State: _____ ZIP: _____

Month & year moved in: ____/____/____ Monthly payment \$: _____

Reason for leaving: _____

Name of building/community (write N/A if not applicable): _____

Name of owner or agent: _____ Phone Number: (____) _____ - _____

Have you ever...

Been sued for non-payment of rent? _____

Broken a rental agreement or lease? _____

Been sued for damage to property? _____

Previous Address #2

Street address: _____ Apartment #: _____

City: _____ State: _____ ZIP: _____

Month & year moved in: ____/____/____ Monthly payment \$: _____

Reason for leaving: _____

Name of building/community (write N/A if not applicable): _____

Name of owner or agent: _____ Phone Number: (____) _____ - _____

Have you ever...

Been sued for non-payment of rent? _____

Broken a rental agreement or lease? _____

Been sued for damage to property? _____

ABELES BUILDING

RENTAL APPLICATION PAGE 4

PART C: EMPLOYMENT AND INCOME

- ☐ I'm an applicant, and I alone will be financially responsible for my lease.
- ☐ I'm an applicant, and I will share financial responsibility for my lease with a co-applicant.
- ☐ I'm a cosigner/guarantor and will be financially responsible for the lease.
- ☐ My co-applicant/s will be financially responsible for my lease.
Leave this section blank and skip ahead to Part D.
- ☐ My cosigner/guarantor will be financially responsible for my lease.
Leave this section blank and skip ahead to Part D.

Employment Status

- ☐ Employed ☐ Employed part-time ☐ Self-employed ☐ Student ☐ Retired ☐ Not employed

Current (or most recent) employer: _____

City: _____ State: _____ ZIP: _____

Phone number: (_____) _____ - _____

Position: _____ Supervisor: _____

Net monthly salary \$: _____ Household net monthly income \$: _____

Previous employer (within the past three years): _____

City: _____ State: _____ ZIP: _____

Phone number: (_____) _____ - _____

Position: _____ Supervisor: _____

Net monthly salary \$: _____ Household net monthly income \$: _____

Other Income

If there are other sources of income you would like us to consider, please list income, source, and person who we can contact for information. You do NOT have to reveal spouse's annual income, child support, alimony, foster care subsidies, social security, or Supplement Security Income unless you want us to consider it in this application.

Amount \$: _____ Source: _____

Name of contact: _____ Phone number: (_____) _____ - _____

Amount \$: _____ Source: _____

Name of contact: _____ Phone number: (_____) _____ - _____

Amount \$: _____ Source: _____

Name of contact: _____ Phone number: (_____) _____ - _____

ABELES BUILDING

RENTAL APPLICATION PAGE 5

PART D: VEHICLE INFORMATION

Vehicle #1

Make: _____ Model: _____
Year: _____ Color: _____ Plate #: _____ State: _____

Vehicle #2

Make: _____ Model: _____
Year: _____ Color: _____ Plate #: _____ State: _____

Vehicle #3

Make: _____ Model: _____
Year: _____ Color: _____ Plate #: _____ State: _____

PART E: EMERGENCY CONTACT

In case of an emergency, please contact the individual below.

First name: _____ Last name: _____

Relationship: _____

Street address: _____ Apartment #: _____

City: _____ State: _____ ZIP: _____

Home Phone: (_____) _____ - _____

Mobile Phone: (_____) _____ - _____

PART F: PET INFORMATION

☐ I have a pet. Please answer the questions below. ☐ I don't have a pet. Skip ahead to Part G.

Breed: _____ Weight: _____ Pet name: _____

Is this a therapy, emotional support, or service animal/pet? ☐ No ☐ Yes Please provide supporting documents.

PART G: SIGNATURE AND CONSENT TO INCOME & CREDIT VERIFICATION

In considering this application, management will rely heavily on the information which you have supplied. It is important that the information be accurate and complete. By filling out this application, you represent and warrant the accuracy of the information and authorize management to verify any reference that you have listed. In addition, you authorize management to obtain a credit report. A credit check will appear on your consumer credit report as an inquiry.

Our acceptance and review of your Rental Application does not constitute an approval of your Application or an agreement to the lease. If we approve your Application and enter into a Lease Agreement, however, the information and representation on this Application will become part of your lease.

Applicant signature: _____

Date: _____ / _____

ABELES BUILDING

DEPOSIT AGREEMENT

PART H: SECURITY DEPOSIT AGREEMENT

Part H should only be completed by one individual per lease.

☐ I am the individual financially responsible for the security deposit.

Complete this section.

☐ I am not the individual financially responsible for the security deposit.

Leave this section blank.

A deposit equal to one month's rent is due at the time you submit your Application. If we approve your Application and enter into a Lease Agreement, we will keep your deposit and treat it as your security deposit under the Lease. If we do not approve your Application, we will keep \$20 of your deposit, or the cost of your credit report (whichever is less), and return the balance to you.

Once we approve your Application, you still have 48 hours to change your mind and request a return of your deposit. If you notify us within this 48-hour period that you do not want to sign a Lease Agreement, we will retain \$20 of your deposit, or the cost of your credit report (whichever is less), and return the balance of your deposit to you. If you notify us after this 48-hour period has passed that you will not enter into a Lease, we will retain your full deposit received along with this Application and will release you from any further obligation to us. Upon acceptance, you will receive an approval letter with your anticipated move-in date. You must take occupancy of your apartment within 14 days of that anticipated move-in date, or we will revoke your approval, retain your full deposit, and release you from any further obligation to us.

If, after reviewing your Application, we inform you that we cannot approve it unless you provide a guarantor, you may withdraw your application and receive a refund of your deposit less \$20, or the cost of your credit report (whichever is less), which we will keep as an application fee. If you agree to provide a guarantor you must do so within three business days or you will forfeit your entire deposit.

Our acceptance of your deposit under this Deposit Agreement does not constitute our approval of your Application or an agreement to enter into a Lease with you.

Applicant signature: _____

Date: ____/____/____

ABELES BUILDING

LANDLORD REFERENCE

To be completed by applicant:

If you are the cosigner/guarantor, leave this section blank.

Applicant's name: _____

Street address: _____ Apartment #: _____

City: _____ State: _____ ZIP: _____

I hereby give permission to release any and all information regarding my rental history.

Signature: _____

Date: ____/____/____

To be completed by landlord:

To Whom It May Concern:

The person named above has applied to rent an apartment at the Abeles Building, and has provided your name as a current or previous landlord. We are asking for your assistance with our approval process. Please fill out the information below at your earliest convenience, and fax or mail the form back to our leasing office. We will keep this information in confidence.

Dates of residency: _____ to _____

Amount of monthly rent \$: _____ Amount of security deposit \$: _____

Number of late payments in past 9 months: _____

How late? _____ Late fees paid? _____

Were there any lease violations? _____

If so, what were the nature of the violations? _____

Has the resident been violent or consistently abusive towards other residents, guests, visitors, the Landlord, or the Landlord's employees? _____

Has the resident damaged their apartment, common areas, grounds, or the property of the Landlord or other tenants? _____

Has the resident consistently disturbed the right to quiet, peaceful enjoyment of other tenants at your community? _____

Will you (did you) keep any of the security deposit? _____

Would you rent to this applicant in the future? _____

Additional Comments: _____

Name and title of the person supplying the above information (please print): _____

Signature: _____ Date: ____/____/____

Phone Number: (_____) _____ - _____

Email: _____

Thank you! - The Abeles Building