CHELSEA TOWER

100 West 26th Street, New York, NY 10001

Phone: 212-463-0100 Fax: 212-463-0040 Email: LeasingManager@ChelseaTower.com

Apt#_____ Rent \$_____ Income Requirements for Applicant (monthly rent x 40) \$___

There is a <u>non-refundable</u> fee of \$20 for each of Applicant and Guarantor for the credit verification and application processing. *Please fax or Email all documents concerning your application to the Leasing Office*

Documents Required for Applicant: (Must show at least monthly rent x 40 in income)

A. If you are employed by a company:

- 1. A currently dated employment letter on employer's letterhead verifying length of employment and annual income for the past two years;
- 2. Copy of two most recent pay stubs;
- 3. One current bank statement with name, account number and balance;
- 4. Valid Photo ID.

<u>Please note: If your company's policy is to verify salary only through one of the automated systems (such as</u> <u>TheWorkNumber.com</u>), please obtain the verification yourself and fax it to us.

B. If you are self-employed:

- 1. Letter from your accountant verifying length of self-employment, type of business and annual income for past two years;
- 2. Most recent Tax Return First and Signature Pages only
- 3. One current bank statement with name, account number and balance;
- 4. Valid Photo ID.

Documents Required for Guarantor: (Must show at least monthly rent x 80 in income)

C. <u>Guarantor: (must show same documents as Applicant):</u>

Income requirement for Guarantor (monthly rent x 80) \$_

- 1. <u>All items listed in either Items A. or B. above</u>; and
- 2. Signed and completed Residential Application (attached).

D. Corporate Lease with Personal Guarantor:

- 1. Copy of an income statement and balance sheet or Annual Report;
- 2. Corporate Resolution; and
- 3. A Personal Guarantor (see Guarantor's requirements Item C. above).

To complete your application you will need to bring two separate certified or bank checks to the leasing office within one business day. Please make checks payable to: S & P/ DM 26 Development, LLC

Rent \$_

Security deposit \$___

K the **credential** researchers

140 West End Ave - Suite 17J - NYC, NY 10023 www.credentialresearchers.com

Tel 212-873-8290 / 866-873-8290 toll free Fax 212-873-2769 / 917-441-6785

APARTMENT DATA												
Building Address:			Apt#:			Monthly Rent:						
Today's Date: Lease Date:			Lease Term:									
APPLICANT NAME		X et 1.14	T			*****	1 200			0 \ N		
First Name: Middle:		Middle:	Last:				DOR	DOB;		Social Security No:		
Telephone-Work:	elephone-Work: Home:		I	Cell:			Email:			<u> </u>		
Co-Tenant:			Guarantor:				1					
Emergency Contact:			Phone:									
If you have pets, please specify size/type.												
RESIDENTIAL HISTO	DRY											
Current Address:			City:			State:		Zip:			Apt:	
Length of Time:	Landlord/Mortgage Holder:				Landlord Telephone:			1	Monthly Payment:		nt:	
COMPLETE IF CURRENT ADDRESS IS LESS THAN TWO YEARS												
Address:			City:			State:		Zip:			Apt:	
Length of time:	Landlord/N	alord/Mortgage Holder:			Landlord Telephone:			Мо	Monthly Payment:			
EMPLOYMENT INFO	RMATION				1				l			
Employer:			Employer's Address:				How Long:			:		
Human Resources/Supervisor:			Telephone;									
			Annual Income: Bonus:									
COMPLETE IF CURRENT EMPLOYMENT IS LESS THAN TWO YEARS												
Employer: Employe			Employer's A	byer's Address: How Long:					•			
Human Resources/Supervisor:			Telephone:					·····		.l		
Position Held:			Annual Income:			Bonus;						
FINANCIAL INFORM	ATION											
Bank:		Branch Address:			Bank Officer:				Bank Telephone:			
Account Number:				Checking Savings Securities (Please check appropriate a/c)								
Bank:	ank: Branch Address:			Bank Officer:				Ba			Bank Telephone:	
Account Number:				Checking Savings Securities (Please check appropriate a/c)								

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Additional Inform	ATION	
Interest, Dividends, Real Estate,	Portfolio value, etc.:	
REFERENCES		
Accountant (If applicable);		Telephone:
Attorney (If Applicable):		Telephone:
ever been dispossessed from income, credit history, reside apartment rental/purchase ap Credential Researchers and a what may be discussed or re conjunction with my applica hereto free and harmless of a former landlords, property m part of that certain lease. Information about your right annually from each major er screening are Experian (www Contact information for Cred or inaccurate credit informat I understand that the credit	any apartment, nor am I no ence, banking relationships, oplication. If this application any other parties hereto to co vealed. I am aware that a cro tion. I hereby hold the own any liability for providing w hanagers, supervisors, or em as as an apartment Applicant edit reporting agency. The c <u>w.experian.com</u> , or by phon- dential Researchers is provid- ion to the consumer reportir at check fee is non-refunda	rther represent that I am not renting a room or an apartment under any other name, nor have I w being dispossessed. I hereby give my permission to conduct inquiries concerning my character and reputation for the purpose of verifying information, provided by me, on any is approved, I further authorize the owner, landlord; management firms its agent(s), onduct further credit inquiries. I understand there are no limitations or restrictions regarding edit history, OFAC search, and landlord/tenant court record search will be done in er, landlord; management firms its agent(s), Credential Researchers and any other parties ritten or verbal information and/or discussing the quality of my tenancy with current and ployers. If a lease is approved and executed, this completed application form may become a used by Credential Researchers, the firm which does tenant e at 888-397-3742) and Trans Union (<u>www.transunion.com</u> or by phone at 800-888-4213). ded at the top of the next pages of this application. You have the right to dispute incomplete ng agencies who must remove inaccurate or unverifiable information from your credit report. ble .

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*Please note: If your company's policy is to verify salary only through one of the automated systems (such as TheWorkNumber.com which charges \$17.00) please obtain the verification yourself and fax it to us.

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AUTHORIZATION TO RELEASE RECORDS

(Contact/Title)

(Fax Number)

LANDLORD:

TO:

(Company Name)

(Phone Number)

EMPLOYER:

TO:

(Company Name)

(Contact/Title)

(Fax Number)

(Phone Number)

BANK:

TO:

(Bank Name)

(Phone Number)

(Fax Number)

(Contact/Title)

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 the abovementioned parties that The Credential Researchers, Ltd. will be contacting them. Please indicate the importance of a prompt response. Thank you.

CHELSEA TOWER

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IMPORTANT NOTICE REGARDING CANCELLATIONS

In the event your application is approved and a lease is issued to you and not returned to the owner within seven (7) calendar days thereafter, and you subsequently notify the owner of your election not to rent the apartment, the owner reserves the right to charge you an amount up to one month's rent. Following any such cancellation hereunder, the balance of any funds paid in connection with the lease application shall be refunded to you.

READ, UNDERSTOOD and AGREED:

Applicant's Name:_____

Applicant's Signature:_____

Applicant's Name:_____

Applicant's Signature:_____

Applicant's Name:_____

Applicant's Signature:_____

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Credit Card Authorization

Applicant(s): Property Name/Owner/Manager	(For internal use only)
Property Name/Owner/Manager	
	:
Property Address:	
City: \$	State: Apartment/Unit:
Credential Researchers, Ltd'. An on any transaction that is protect is non-refundable. PLEASE KEEP	I appear on your credit card statement is ' <i>The</i> n administrative surcharge of \$20.00 will be imposed sted or denied by the Applicant. The credit checking fe P A COPY OF THIS AS YOUR RECEIPT.
Check one: Visa Ma	
Credit Card Number:	3 or 4 Digit Security Code:
Email:	
Conditional data Billion Address	
Cardholder Billing Address	
Street:	
	_ State: Zip Code:
Phone:	
Card Issuer	
Phone:	(From the back of the card)

Kthe**credential**researchers

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FOR CONFIDENTIAL USE ONLY NEW YORK DISCLOSURE AND RELEASE

In connection with my application for employment and/or tenant screening (including contract for services) with **Steinberg & Pokoik Management Corporation**. I understand that consumer reports which may contain public record information and investigative consumer reports consisting of interviews with employers, neighbors, friends, and associates may be requested through one or more consumer reporting agencies. These reports may include the following types of information: names of employers and dates of previous employment, reason for termination of employment, work experience, accidents, etc. I further understand that such reports may contain public record information concerning my driving record, workers' compensation claims, credit, bankruptcy proceedings, criminal records, etc., from federal, state and other agencies which maintain such records. I hereby consent to your obtaining the above information from such agency.

I AUTHORIZE, WITHOUT RESERVATION, ANY PARTY OR AGENCY CONTACTED BY THE CONSUMER REPORTING AGENCY TO FURNISH THE ABOVE-MENTIONED INFORMATION.

I have the right to make a request to the consumer reporting agencies at their provided address, upon proper identification, to request the nature and substance of all information in its files on me at the time of my request, including the sources of information; and the recipients of any reports on me which the agency has previously furnished within the two year period preceding my request.

I hereby authorize procurement of consumer report(s). If I am hired, sign a lease (or contracted), this authorization shall remain on file and shall serve as ongoing authorization for you to procure consumer reports and investigative consumer reports at any time during my employment (or contract) period.

I acknowledge receipt of a copy of Article 23-A of New York Correction Law.

Print Name

Social Security No.

Applicant's Signature

Date

Fair Credit Reporting Act Notice

Information contained herein should not be the sole determiner in the evaluation of this individual. (Human error in compiling this information is possible.) All other factors, references and current situations should be considered. The information in this report is derived from records in accordance with the Pair Credit Reporting Act (FCRA, Public Law 91-508 Title VI). This information may only be used to verify statements made by an individual for insurance, employment purposes, tenant screening or in connection with other business. Our policy requires purchasers of these reports to have a signed consent form. This issures that all users will abide by their obligations, and remain in compliance of FCRA. 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 from any improper use of this information.



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FOR CONFIDENTIAL USE ONLY

Authorization for Release of Information and for the Procurement of a Background Report

I consent to have a background investigation made as to my character, professional reputation, employment history, credit history, driving record, social security information, criminal record, and other pertinent information. I hereby authorize **Steinberg & Pokoik Management Corporation** to obtain a background report containing the foregoing information from The Credential Researchers Ltd. NYC, NY 10023

I am aware that the background report I consent to have prepared may include information obtained from a variety of sources, including but not limited to government agencies, public agencies, past employers, personal interviews with those who know me, and others.

I also authorize and request every person, firm, company, corporation, governmental agency, court, law enforcement office, and any other entity having control or possession of any information pertaining to me or my background to furnish same to any requesting party.

By this Authorization for Release of Information and for the Procurement of a Background Report, I hereby forever release, discharge, exonerate, hold harmless and indemnify **Steinberg & Pokoik Management Corporation** and The Credential Researchers Ltd., its affiliates, employees, representatives, agents, and subcontractors, and any other person, entity, organization or institution furnishing information to them from any and all liabilities of every nature and kind, including but not limited to claims for libel, slander, invasion of privacy, related tort claims, misuse of information obtained from The Credential Researchers Ltd., and any other claim or cause of action arising out of the furnishing, inspection or copying of any documents, files, records, and other information, or the investigation made by or on behalf of **Steinberg & Pokoik Management Corporation** and The Credential Researchers Ltd., unless such release is determined to violate the public policy of the state or federal district in which this contract is executed, and in that event this release will be permitted to the maximum extent allowed by the governing law.

I understand that a photocopy or facsimile of this signed document shall be considered as valid as an original.

IMPORTANT! SATISFACTORY TO CONTACT PRESENT EMPLOYER? YES . NO .

Applicant's Signature	Date
Printed Name:	Social Security No.:
Street Address:	Date of Birth:
City/State/Zip:	

* Responses to these questions are completely voluntary. You need not respond to have your application considered. However, without this information, we may be unable to distinguish you from another person in the event we discover adverse information during our background investigation.

Fair Credit Reporting Act Notice

Information contained herein should not be the sole determiner in the evaluation of this individual. (Human error in compiling this information is possible.) All other factors, references and current situations should be considered. The information in this report is derived from records in accordance with the Fair Credit Reporting Act (FCRA, Public Law 91-508 Title VI). This information may only be used to verify statements made by an individual for insurance, employment purposes, tenant screening or in connection with other business. Our policy requires purchasers of these reports to have a signed consent form. This assures that all users will abide by their obligations, and remain in compliance of FCRA. 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 from any improper use of this information.

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NOTICE OF NEW RULE UNDER ARTICLE 11 (B) OF ALL LEASES FOR RESIDENTIAL TENANTS OF 100 WEST 26TH STREET, NEW YORK, NY 10001

EFFECTIVE IMMEDIATELY, ALL APPLICATIONS TO SUBLET THE APARTMENT OR TO ASSIGN THE LEASE UNDER REAL PROPERTY LAW SECTION 226-B OR OTHERWISE SHALL BE IN WRITING AND BE ACCOMPANIED BY A NON-REFUNDABLE PROCESSING AND CREDIT REVIEW FEE OF FIVE HUNDRED NINETY DOLLARS (\$590.00). PAYMENT OF THE \$500.00 PORTION OF THE FEE SHALL BE BY OFFICIAL CHECK MADE PAYABLE TO STEINBERG & POKOIK MANAGEMENT CORP. PAYMENT OF THE \$90.00 CREDIT FEE SHALL BE PER CREDIT CARD IN ACCORDANCE WITH THE CREDIT CHECK APPLICATION. PER THE REAL PROPERTY LAW STATUTE, THE APPLICATION REVIEW PROCESS MAY TAKE UP TO THIRTY DAYS. PLEASE DO NOT CONTACT THE OFFICE DURING THE REVIEW PERIOD.

S&P/DM 26 DEVELOPMENT, LLC

AUGUST 21, 2015