

Silk Mill Lofts
110 North Fulton Street
Bloomfield New Jersey 07003
Onsite Manager Tel. 973-459-8472

Management Office:
Mosaic Realty Partners LLC
1294 East 19 Street, Suite 300
Brooklyn, NY 11230
718-743-1173
Fax 718-743-1643

APPLICATION TO LEASE

Apartment# _____

Monthly Rent: _____ **Security Deposit:** _____

Lease Period: _____ **From:** _____ **To:** _____

Adults: _____ **# Children:** _____ **Type and # of Pets:** _____

Applicant Full Name: _____ **Social Security#:** _____ - _____ - _____ **D.O.B:** ____ / ____ / ____

Present Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Phone# _____ **Email Address:** _____

Rent Paid per Month: _____ **Reason for Moving:** _____ **How Long:** _____

Landlord Name: _____ **Landlord Address:** _____ **Landlord Phone#** _____

Previous Address: _____ **City:** _____ **State:** _____ **Zip:** _____

Previous Landlord Name: _____ **Phone:** _____

Applicant Present Employer: _____ **Address:** _____ **Phone#** _____

Position Held: _____ **Length of Employment:** _____

Yearly Salary: _____ **Any Bonuses:** _____

Supervisor Name: _____ **Phone#** _____

Applicant Other Current Income: _____ Total Household Yearly Income: _____

Previous Employer: _____ Address: _____ Phone# _____

Name of Bank: _____ Checking Balance: _____ Savings Balance: _____

Applicant:

Automobile Financing: _____

Real Estate Owned: _____ Mortgages: _____

Alimony / Child Support & Separation Maintenance Charges: _____

Any Other Debts or Liabilities: _____

Name & relationship of all people who will occupy the apartment with you (other than co-applicant):

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Have you or anyone who will occupy the apartment ever been evicted: _____

Have you or anyone who will occupy the apartment ever broken a rental agreement / lease: _____

If so who and reason: _____

Personal reference name & phone: _____

In case of emergency contact: _____

Co-Applicant (If Applicable)

Full Name: _____ Social Security#: _____ - _____ - _____ D.O.B: ____ / ____ / ____

Present Address: _____ City: _____ State: _____ Zip: _____

Phone# _____ Email Address: _____

Rent Paid per Month: _____ Reason for Moving: _____ How Long: _____

Landlord Name: _____ Landlord Address: _____ Landlord Phone# _____

Previous Address: _____ City: _____ State: _____ Zip: _____

Previous Landlord Name: _____ Phone: _____

Co-Applicant

Present Employer: _____ Address: _____ Phone# _____

Position Held: _____ Length of Employment: _____

Yearly Salary: _____ Any Bonuses: _____

Supervisor Name: _____ Phone# _____

Co-Applicant

Other Current Income: _____ Total Household Yearly Income: _____

Previous Employer: _____ Address: _____ Phone# _____

Name of Bank: _____ Checking Balance: _____ Savings Balance: _____

Initial: _____ Date: _____

Co-Applicant

Automobile Financing: _____

Real Estate Owned: _____ Mortgages: _____

Alimony / Child Support & Separation Maintenance Charges: _____

Any Other Debts or Liabilities: _____

Have you or anyone who will occupy the apartment ever been evicted: _____

Have you or anyone who will occupy the apartment ever broken a rental agreement / lease: _____

If so who and reason: _____

Personal reference name & phone: _____

In case of emergency contact: _____

If you were referred to Silk Mill Lofts by an existing tenant, please tell us that tenant name: _____

Authorization / please read carefully before signing.

I hereby warrant that all my representations set forth above are true. I understand that this is being relied on by landlord in renting the subject premises to me. I understand that misrepresentation of the above acts will void my rental agreement and it will be grounds for immediate eviction with loss of all monies paid. Silk Mill Lofts shall in no event be liable as respects any matter concerning this application, or concerning any act of the landlord or failure to act on the landlord in connection with this application, or in connection with any lease or leases contemplated herein. No representations or agreements by agents, brokers or others are binding on the landlord or agent unless included in the written lease proposed to be executed. I hereby authorize Silk Mill Lofts or its agents to verify any of the information above including requesting reports from credit reporting agencies, criminal background checks and housing checks. I understand that if my application is rejected, my deposit will be refunded. I understand that if my application is accepted by the landlord, my deposit will not be refunded. All monies for credit checks, criminal checks and housing checks are not refundable.

Signature of Applicant: _____ Date: _____

Signature of Co-Applicant: _____ Date: _____

Additional required information:

- Letter of employment stating length of employment and salary.
- Last two pay stubs.
- First two pages of last two years tax returns.
- Bank Statements both checking and savings.
- Copy of a photo id.
- Any other documents that will show financial stability.

Once completed, please send this application, the non-refundable application fee, and the additional required information to:

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