DARIKO REALTY, LLC PO BOX 630103 LITTLE NECK, N.Y. 11363-0103 TEL 516-829-9600 FAX 516-829-9601

Application for:					
Today's Date:	Date of Birth:	S#			
Last Name:	First Name:	First Name:		MI:	
Current Address:		Apt#:			
City:		State:		Zip:	
How long have you resided a	t this address:				
What is your reason for leavi	ng:				
Driver's License #		State:			
Home Phone:	Work Phone:		Cell Phone: _		
Email Address					
Employment Information					
Place of Employment:					
Address:	City:		State	Zip:	
Length of employment:	Position:		Salary	:	
Present Landlords Name:			Phone #:		

Bank Reference Bank Name: Branch Address:_____ Checking Account #: Savings Account #: Personal Reference Name:_______ Phone#:_____ Address: City: State: Zip: Have you ever been arrested or convicted of any crime? If yes please explain: Are there any judgments pending against you? If yes please describe:______ Have you ever declared bankruptcy?_____ Do you presently have any credit?_____ Have you ever been evicted? I hereby acknowledge that all information is true, and agree that upon my tenancy, the information provided in this application will become part of the lease agreement between the landlord and me. I hereby authorize and give permission to the landlord and its agents to obtain information on, but not limited to, my credit report, criminal report, court report, or whatever is necessary to process my application. Applicant Signature:______ Date: