



## **Application Requirements**

Thank you for applying for an apartment at Essex Gardens. Please provide us with the following items so that we may process your application:

1. Copy of Photo Identification (for each applicant)
2. Copy of Social Security Card (for each applicant)
3. Proof of Income (W2, Four weeks of pay stubs, letter of employment from current employer stating earnings – for each applicant)

\*Completed and signed application with all supporting documents filled out in their entirety.\*

4. A **MONEY ORDER, OR CERTIFIED CHECK** in the amount of **\$50.00** made payable to Essex Gardens, (this is a non-refundable application fee). Please add **\$25.00** for each additional applicant over the age of 18 that will be living in the apartment.

**Applications cannot be processed until ALL of the above information has been provided.**

**Once your application has been approved, you will need to provide the following:**

1. A payment of your first month's rent as a deposit. This deposit must be paid in order to reserve the apartment and is Non-refundable.
2. A Money Order or Certified Check in the amount of \$50.00 for township inspection made payable to: *Maywood Township*.
3. At lease signing you will need to provide a payment for your security deposit. Security Deposit is equal to 1½ months rent.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\*Payment may be in the form of: Visa/ Mastercard/ Discover/ Amex or a Money Order / certified check made payable to Essex Gardens\*



### Rent And Policy Schedule

UNITS TYPE	SQ. FT.	TOTAL UNITS	CURRENT RENT	WEEKLY INCOME REQUIREMENT	DATE OF CHANGE
One BR	600	60	\$1,500-\$1700	\$1038 - \$1176	5/18/20
Two BR	700	60	\$1,775-\$1975	\$1228 - \$1367	5/18/20

Rent prices may vary. Rent includes heat and hot water.  
Resident is responsible for electric, cooking gas, and renter's insurance

#### PREMIUMS

Garage Parking: \$90.00 per month  
Reserved Parking: \$65.00 Per month

#### OCCUPANCY STANDARDS:

One bedroom – up to two persons maximum  
Two bedroom – up to four persons maximum

#### COMMUNITY POLICIES

Lease Term: 12 months

#### PETS (Restrictions Apply)

\$45.00 per month per dog and \$35 per cat  
\$300.00 1<sup>st</sup> pet \$150 2<sup>nd</sup> pet, One-time non-refundable pet fee per apartment.

#### DEPOSITS:

Security: Equal to 1½ months' rent  
Amount of security deposit is subject to change based on application process.

**A separate Money Order or credit/debit card payment must be provided for your security deposit.**

#### LEASE RENEWAL POLICY

Lease Term: 12 month Lease term. Increases based on market rents or rent control  
Lease Buyout: Upon first renewal: Tenant may purchase 60 Day Termination Rider for \$500  
Month to Month: Upon first renewal: Tenant may sign a 'MTM' addendum for \$100 monthly fee  
Lease Break: 30 days' notice and penalty equal to two month's current rent  
Internal Transfer: \$500.00 if during lease term. No charge if term is fulfilled. (Other conditions apply)

#### FEES

Application Fee: \$50.00 – first applicant/\$25.00 per additional applicant/\$100.00 corporate  
Holding Fee: One month's rent. Holding fees are nonrefundable  
Inspection Fee: \$50.00 inspection fee made payable to Maywood Township  
NSF Fee: \$35.00 For Non-Sufficient-Fund payments, (bounced checks)  
Late Fee: 5% of the current month's unpaid rental balance

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date



## **Resident Selection Criteria**

**Income:** Each occupant over the age of 18 is required to complete an application. Each applicant must demonstrate a verifiable income. The minimum annual income requirements are as follows: Applicant must earn three times the annual rent.

**Combined Income:** The combined income of roommates will be considered, provided each applicant earns a minimum of 60% of the total qualifying income.

**Credit:** A credit history depicting any of the following may be grounds for denial:

- a. Unpaid liens or judgments.
- b. Bankruptcy, unless applicant can provide verification that positive credit has been reestablished and maintained after three years of discharge.
- c. A statistically validated scoring model is used to measure each applicants risk in terms of paying their monthly rent. The model takes into consideration many aspects of an applicant's credit history and income to determine the amount of risk for that particular applicant. Management has set specific decision points within the models score range for *Essex Gardens*. An applicant may be approved or denied based on the scoring model.

**Rental History:** Applicant must demonstrate a minimum of two (2) years rental or ownership history if applicable. History of a poor payment record, destructive or abusive behavior or poor housekeeping practices may be grounds for denial.

**Co-signers:** Co-signers will be considered only where income is deficient, not with credit or job defaults. Co-signers must qualify at 1.5 times the qualifying income.

**Criminal:** A criminal background check will be run on all approved applications. Any conviction of a crime may result in the application being denied.

**Occupancy:** There is a maximum occupancy limit on each type of apartment. One bedroom – 2 occupants and two bedrooms – 4 occupants. Violation of this regulation will result in eviction if not corrected immediately.

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Applicant Signature

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Date



### Verification of Landlord History

To \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_.

Verification of information supplied by the applicant shown below

Name \_\_\_\_\_  
Address \_\_\_\_\_  
SSN \_\_\_\_\_

This person has applied for an apartment at Essex Gardens. We are required by the owner to verify all information that is used in determining this person's eligibility. We ask your cooperation in providing the following information and returning it to Essex Gardens at the address below, fax it to **908-643-7311** or email to **office@essexgardensnj.com**. The applicant has consented to this release of information as shown here.

#### Information being requested:

1. How long did the applicant reside at this address? \_\_\_\_\_
2. How many bedrooms? \_\_\_\_\_ How many people lived in this unit? \_\_\_\_\_
3. What was the monthly rent? \_\_\_\_\_
4. What was included in the rent?  Gas  Electric  Heat  Hot water
5. Was the applicant ever late in the payment of the monthly rent? \_\_\_\_\_ If yes, how many times after the 5<sup>th</sup> of the month in the past year? \_\_\_\_\_
6. Was the applicant destructive to the apartment/home or the surrounding areas? \_\_\_\_\_ If yes, please explain \_\_\_\_\_  
\_\_\_\_\_
7. What living condition did the applicant maintain?  Acceptable  Unacceptable
8. Did the applicant give proper notice? \_\_\_\_\_ What was the reason for leaving?  
\_\_\_\_\_
9. Would you re-rent to him in the future? \_\_\_\_\_ If not, Why? \_\_\_\_\_  
\_\_\_\_\_
10. Additional Comments: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Print name and title of person giving information

\_\_\_\_\_  
Name of Agency or Organization

\_\_\_\_\_  
Signature of person giving information

\_\_\_\_\_  
Date

\_\_\_\_\_  
Telephone number

I hereby authorize the release of the requested information

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date



## REQUEST FOR VERIFICATION OF EMPLOYMENT CONVENTIONAL PROPERTIES

<p><b>Name and Address of Applicants Employer:</b></p> <p>_____</p> <p>_____</p> <p>_____</p> <p>To Employer: An application has been made by the above named applicant for residency in our apartments. The applicant has indicated that he (she) is employed by you, and would appreciate it if you would confirm this employment in the space provided below.</p>	<p>Name of applicant: _____</p> <p>Address: _____</p> <p>Social Security Number: _____</p> <p>Work Division or I.D. Number: _____</p> <p>I hereby give my approval for verification of my employment and salary status.</p> <p>_____ Applicant Signature <span style="float: right;">Date</span></p>	
<b>EMPLOYER'S VERIFICATION</b>		
<b>Present Position</b>	<b>Date Hired</b>	<p style="text-align: center;"><b>Present Rate of Pay</b></p> <p>Hourly \$ _____ X _____ Hrs/Wk X _____ Wk/Yr</p> <p>Weekly \$ _____ X _____ Wk/Yr</p> <p>Annual \$ _____ Per Year</p>
<p><b>Additional Compensation:</b> (Actual Amounts received over the last twelve months)</p>		<p>Overtime \$ _____</p> <p>Commissions \$ _____</p> <p>Bonus \$ _____</p> <p>Tips \$ _____</p>
<b>Probability of continued employment:</b>	<b>Anticipated <u>Total</u> Income for the Next 12 Months:</b>	
<p><b>Military Service:</b> If Applicant is in military service please report income on a monthly basis as follows:</p> <p>Base Pay \$ _____; quarters &amp; subsistence \$ _____; flight or hazard duty allowance \$ _____.</p>		
<p>Please return this from to:</p> <p style="text-align: center;">Essex Gardens 15 Essex Court, Maywood, NJ 07607 T: 201-845-8530 F: 908-643-7311 office@essexgardensnj.com</p>	<p>_____ Employers Signature <span style="float: right;">Date</span></p> <p>_____ Title <span style="float: right;">Phone</span></p> <p style="text-align: center;"><b>Thank you for your assistance.</b></p> <p>_____ Management Representative</p>	

Jersey Central Management - Equal Housing Opportunity





Essex Gardens Apartments  
 15 Essex Court, Rear Entrance  
 Maywood, NJ 07607  
 T: 201-845-8530  
 F: 908-643-7311  
 E: office@essexgardensnj.com

## APPLICATION FOR RENTAL

**NOTICE: All adult applicants (18 or older) must complete a separate application for rental.  
 Gray Areas Are to be Filled Out by Leasing Consultant**

<b>Application Date:</b>	<b>Holding Deposit Due(VAC):</b>	<b>Rent:</b>	<b>Move In Date:</b>	<b>Leasing Consultant:</b>
<b>Apartment No:</b>	<b>Holding Deposit Due (NTV):</b>			

## APPLICANT INFORMATION

<b>Last Name</b>		<b>First Name</b>		<b>Middle</b>
<b>SSN Government Issued ID #</b>		<b>Date of Birth</b>		<b>Email Address</b>
<b>Cell Phone</b>		<b>Home Phone</b>		<b>Work Phone</b>

## CURRENT ADDRESS

<b>Street Address</b>		<b>City, State</b>		<b>Zip</b>
<b>Date In</b>	<b>Scheduled Move Out Date</b>	<b>Landlord/Mortgage Co. Name</b>		<b>Landlord Phone</b>
<b>Current Rent/Mortgage</b>		<b>Reason for Leaving</b>		

## PREVIOUS ADDRESSES (LIST ALL ADDRESSES PAST 5 YEARS)

<b>Street Address</b>		<b>City, State</b>		<b>Zip</b>
<b>Street Address</b>		<b>City, State</b>		<b>Zip</b>
<b>Street Address</b>		<b>City, State</b>		<b>Zip</b>

Support Animals for the disabled are not considered pets, but do require advance written approval from management.

<b>PETS</b>			<b>Type</b>	<b>Breed</b>	<b>Lbs. at full growth</b>	<b>Type</b>	<b>Breed</b>	<b>Lbs. at full growth</b>

## CURRENT EMPLOYMENT & INCOME INFORMATION

<b>Job Title</b>		<b>Employer/Company/Address</b>		<b>Monthly Gross Salary</b>
<b>Supervisor Name</b>		<b>Supervisor Phone</b>		<b>Start Date</b>
<b>(2<sup>nd</sup> Job if Applicable ) Job Title</b>		<b>Employer/Company/Address</b>		<b>Monthly Gross Salary</b>
<b>Supervisor Name</b>		<b>Supervisor Phone</b>		<b>Start Date</b>
<b>Other Income Description if applicable</b>				<b>Monthly Income</b>

Year	Make	Model	Color	License Plate #

**EMERGENCY CONTACT**

Name	Relationship	Address	Phone

**PLEASE ANSWER THE FOLLOWING QUESTIONS**

Have you ever been convicted for a crime? (CIRCLE) YES    NO	If so, please list and explain the nature of the crime:
Have you ever been evicted by a Landlord? (CIRCLE) YES    NO	If so, please list and explain the nature of the eviction:
Any Litigation, such as Suits, Judgments, Bankruptcies, Foreclosures, etc.? YES    NO	If so, please explain:

**List Names and DOB for EVERY Person that will be residing in your home below**

FIRST NAME	LAST NAME	DATE OF BIRTH	RELATIONSHIP TO APPLICANT

**OTHER INFORMATION**

How did you hear about Essex Garden Apartments? *(Please Be Very Specific)*

Please include any other information you believe would help to evaluate this application:

I have read the foregoing and certify the information herein is TRUE and CORRECT, and that this application is submitted for the purpose of inducing approval of this application in my behalf. I understand that the procedure for processing my application includes the preparation of an investigative Consumer Report, whereby information is obtained through credit report(s), court records, and personal interviews with my current and/or previous landlord, employer, or others with whom I am acquainted. I hereby consent for you to process our application through Corelogic to obtain and verify my credit information, including, but not limited to a criminal background check for the purpose of determining whether or not to lease an apartment to me. This inquiry may include, but is not limited to, information regarding my character, general reputation, personal characteristics, and mode of living. I have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation. Furthermore, I understand that should I lease an apartment, you shall have a continuing right to review my credit information, rental application, criminal background, payment history and occupancy history for account review purposes and for improving application methods. I hereby agree to execute a lease in accordance with the terms set forth in the rental application, in the event of the approval of this application. ***If I decide to cancel this application or fail to sign the lease I understand I would forfeit the non-refundable application fee/s and deposits/rent paid.*** Owner and/or agent for the owner reserve the right to reject this application and to refuse possession of the above mentioned accommodations. I/We understand that if our name(s) appear on the register of sex offenders, as well as on court records or the like, this application may be rejected. This information is not privileged, and is valid in copy and fax form.

**Don't Forget to Include the Following with your Application:**

Gov't Issued Photo ID	Social Security Card	Proof Of Income	Application Fee + Holding Deposit
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<b>Applicant Signature</b>	<b>Date Signed</b>	<b>Preferred Move In Date</b>
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**Office Use Only Beyond This Point**

Application Was (Circle One):	Approved	Conditionally Approved	Declined
Leasing Director Has Reviewed Application and All Documents Provided <input type="checkbox"/>	Leasing Director Signature	Date	
Apartment Leased to Applicant	Rent	Move In Date	Agent

## MULTIPLE DWELLING REPORTING RULE TENANT/APPLICANT INQUIRY

The **New Jersey Law Against Discrimination**, *N.J.S.A. 10:5-1 to -49*, makes it unlawful to discriminate in the sale or rental of housing based on a person's race, creed, color, national origin, ancestry, nationality, affectional or sexual orientation, disability, gender, marital status, familial status (whether you have a child, a parent-child relationship with a minor, or you are pregnant), lawful source of income or rental subsidy used for rental payments.

The **New Jersey Division on Civil Rights** is the State agency that is authorized to enforce the Law Against Discrimination. Under the Division's **Multiple Dwelling Reporting Rules**, *N.J.A.C. 13:10-1.1 to -2.6*, the Division requires landlords to collect and record information about applicants for apartment rentals and tenants in apartment complexes throughout New Jersey. The **Multiple Dwelling Reporting Rule** requires landlords to provide a summary of this information to the Division and to retain the information on this form. **The information is used to prevent and eliminate discrimination in housing.** Your cooperation in filling out this form will assist the Division in enforcing the Law Against Discrimination.

Please note that, although landlords must record certain information about the race and ethnicity of applicants and tenants, it is unlawful to record or ask applicants or tenants about other characteristics such as religion, gender, marital status or affectional or sexual orientation.

If you feel you have been denied housing or treated differently for one of the reasons listed above, you may contact the Division on Civil Rights at (609) 984-3138 for referral to a local Division office for additional information or assistance.

Visit the Division on Civil Rights Web site at: [www.NJCivilRights.org](http://www.NJCivilRights.org)



Tenants/applicants: Fold & tear along dotted line and retain top portion for your records

## MULTIPLE DWELLING REPORTING RULE TENANT/APPLICANT INQUIRY

If the tenant/applicant chooses not to complete this form, the landlord or the landlord's representative is required to conduct a visual observation of the tenant or applicant and then complete this form as accurately as possible.

**This form is not intended to be a part of the rental application process and must be kept separate and apart from rental records.**

Tenant  Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Race/Ethnicity: Please check all that apply to leaseholders (tenants) or applicants.

- Black or African American:** a person having origins in any of the original peoples of Africa
- Hispanic or Latino:** a person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish origin or culture, or a person having a Spanish surname
- Asian:** a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam
- American Indian or Alaska Native:** a person having origins in any of the original peoples of North or South America
- Native Hawaiian or Other Pacific Islander:** a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands
- White or Caucasian:** a person having origins in any of the original peoples of Europe, the Middle East, or North Africa

Date: \_\_\_\_\_ Completed by:  Tenant  Applicant  Landlord

If you have any questions regarding this inquiry please contact the Division on Civil Rights, Multiple Dwelling Unit at 609-984-3138 between the hours of 9:00 to 5:00 Monday through Friday, or e-mail the MDRR unit at [DCRMDRR@njcivilrights.org](mailto:DCRMDRR@njcivilrights.org)







Date: \_\_\_\_\_

I \_\_\_\_\_ hereby authorize Essex Gardens hereinafter called COMPANY, to initiate credit/debit card transactions and to initiate through a third party processing company, if necessary any adjustments for any transaction in error to the account indicated below and the credit card type named below, to credit and/or debit the same to such amount. This authority is to remain in effect until COMPANY has received written notification of its termination in such time and in such manner as to afford COMPANY a reasonable opportunity to act on it.


**CHECK ONE:**

- ( ) ONE-TIME CHARGE – I would like my credit/debit card charged one-time for \$ \_\_\_\_\_ for a holding deposit. \*
- ( ) ONE-TIME CHARGE – I would like my credit/debit card charged one-time for \$ \_\_\_\_\_ for an application fee. \*
- ( ) ONE-TIME CHARGE – I would like my credit/debit card charged one-time for \$ \_\_\_\_\_ for a security deposit.
- ( ) ONE-TIME CHARGE – I would like my credit/debit card charged one-time for the CURRENT AMOUNT DUE as specified by the Company.\*

**Resident/Payor Information**

Resident Name	Apartment Number	Phone Number	
Resident Address		City/State	Zip
Payor Name (if different than resident name)		Phone Number	
Credit Card Billing Address		City/State	Zip

**Credit Card Information**

Credit Card Type	 Credit Card Number	Expiration Date	Amount
Cardholder's Name	Signature	Email Address	

**MANAGEMENT PROCEDURES**

- ( ) Photo ID – Verify Resident photo ID
- ( ) Signature – Check signature against photo ID
- ( ) Credit Card Administrator – Verify Account Information and Resident/Tenant ID