

Asdal Development
76 Route 24 Chester, NJ 07930

Office: 908-879-4427 Fax: 908-879-2641 asdals@comcast.net



Black River Commons Rental Application

PLEASE TELL US ABOUT YOURSELF

Full Name _____

Home Phone () _____ Cell Phone () _____

Date of Birth _____ Social Security # _____

Email Address: _____

Co-Applicant Name _____

Names of Dependents _____

Co-Applicant Date of Birth _____ Social Security # _____

Dependent(s) Date of Birth _____

PLEASE GIVE RESIDENTIAL HISTORY (LAST 3 YEARS)

Current Address _____

Month/Year Moved In _____ Reason for Leaving _____ Rent
\$ _____

Owner/Agent _____ Phone () _____

Previous Address(es) (last 3 years) _____

Rent(s) \$ _____

Owner/Agent(s) _____ Phone () _____

PLEASE PROVIDE YOUR EMPLOYMENT INFORMATION

Your Status: _____ Full Time _____ Part Time _____ Unemployed

Employer _____

Dates employed _____ Employed
as _____

Supervisor Name _____ Phone () _____

Salary \$ _____ per _____. (If employed by above less than 12 months, give name & phone of previous employer: _____)

If you have other sources of income that you would like us to consider, please list income, source, and person (banker, employer, etc.) who we may contact for confirmation. You do not have to reveal alimony, child support, or spouse's annual income unless you want us to consider it in this application.

Amount \$ _____ Source/Contact Name _____

Co-Applicant: PLEASE PROVIDE YOUR EMPLOYMENT INFORMATION

Your Status: _____ Full Time _____ Part Time _____ Student _____ Unemployed

Employer _____

—

Dates employed _____ Employed

as _____

Supervisor Name _____ Phone (

) _____

Salary \$ _____ per _____. (If employed by above less than 12 months, give name & phone of previous employer: _____)

If you have other sources of income that you would like us to consider, please list income, source, and person (banker, employer, etc.) who we may contact for confirmation. You do not have to reveal alimony, child support, or spouse's annual income unless you want us to consider it in this application.

Amount \$ _____ Source/Contact Name _____

PLEASE DESCRIBE YOUR CREDIT HISTORY

Have you declared bankruptcy in the past seven (7) years? Yes _____ No _____

Have you ever been evicted from a rental residence? Yes _____ No _____

Have you had two or more late rental payments in the past year? Yes _____ No _____

Have you ever willfully or intentionally refused to pay rent when due? Yes _____ No _____

Co-Applicant: PLEASE DESCRIBE YOUR CREDIT HISTORY

Have you declared bankruptcy in the past seven (7) years? Yes _____ No _____

Have you ever been evicted from a rental residence? Yes _____ No _____

Have you had two or more late rental payments in the past year? Yes _____ No _____

Have you ever willfully or intentionally refused to pay rent when due? Yes _____ No _____

PLEASE LIST YOUR REFERENCES

Banking Accounts:

Bank _____ Type of Account _____ Account Number _____

Bank _____ Type of Account _____ Account Number _____

Personal Reference or Emergency Contact:

Name _____ Address _____

Phone _____ Relationship _____

Driver's License:

Your Driver's License Number _____ State _____

Vehicle Information:

Make / Model _____ Year _____ License Plate State _____

Deed Restriction: The following language appears in the deed to Black River Commons at the request of the Chester Borough Zoning Board. The applicant acknowledges compliance with the language and represents that their occupancy will not be in violation of the deed restriction. Non-compliance will be the responsibility of the tenant and shall be corrected on request of the landlord.

The Grantor hereby grants the restriction set forth herein, as a perpetual easement to the Grantee, and its successors and assigns. The restriction is dedicated for the following purposes pursuant to Resolution No. 2006-2 dated 6/13/06 of the Chester Borough Zoning Board of Adjustment:

- (1) Occupancy of the residential apartment units on Lot 38, Block 4.01 will be limited to at least one (1) member of the household being age fifty-five (55) years of age or older and no children permitted under the age of nineteen (19) in permanent residency.

ADDITIONAL INFORMATION:

Please give any additional information that might help owner/management evaluate this application?

Where may we reach you to discuss this application?

Day Phone # () _____ Night Phone # () _____

I have read this application and I hereby state and represent that the information provided by me in this Application is complete and accurate. I acknowledge and agree that in the event I enter into a lease with Asdal Development, that lease may be cancelled by the Lessor in the event that any of the information provided by me in this Application, or any other document furnished by me is inaccurate or incomplete. Applicant(s) authorize the Landlord to obtain credit reports on the above listed applicants. Applicant shall give Landlord a non-refundable credit reporting fee in the amount of \$50.00. Use of the space shall remain consistent with the final resolution of the Chester Boro Zoning Board of Adjustment.

Applicant's Signature

Date

**AUTHORIZATION
Release of Information**

I authorize an investigation of my credit, tenant history, banking and employment for the purposes of renting a house, apartment, or condominium from this owner/manager.

Name (please print)

X _____
Signature

Date