

ATLANTIC CONDOMINIUM SUBLET APPLICATION

Directions

Applicant(s), please complete the enclosed application and submit it with the required attachments to the managing agent at the address listed below. If you are subletting this apartment through the services of a real estate broker you may have your broker submit the application to the managing agent. The managing will verify that the application is complete, perform a credit search on the applicants and submit the application to the Co-op admissions committee. The committee will review the application, interview the applicant(s) and make a decision on whether or not to approve the sublet of the apartment by the applicant(s).

About the Unit

Unit _____
Address _____

About the Sublet

Monthly Rent _____
Lease Term _____
Desired Move In Date _____

About the Owner(s)

Owner 1 _____
Owner 2 _____

About the Applicant(s)

Applicant 1

Name _____
Telephone (H) _____ (W) _____
E-mail _____ SS# _____
Date of Birth _____ State _____

Applicant 2

Name _____
Telephone (H) _____ (W) _____
E-mail _____ SS# _____
Date of Birth _____ State _____

Applicant(s) Residence History

Applicant 1

Current Address _____

Agent/Landlord _____ Phone _____

How long? _____ Rent _____

Previous Address _____

Agent/Landlord _____ Phone _____

How long? _____ Rent _____

Applicant 2

Current Address _____

Agent/Landlord _____ Phone _____

How long? _____ Rent _____

Previous Address _____

Agent/Landlord _____ Phone _____

How long? _____ Rent _____

Potential Residents

Name	Age	Relationship to Applicant(s)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Pets _____

Applicant(s) Employment History

Applicant 1

Current Employer _____

Years with Firm _____ Position _____

Income _____

Address _____

Supervisor _____ Phone _____

Previous Employer _____

Years with Firm _____ Position _____

Address _____

Supervisor _____ Phone _____

Applicant 2

Current Employer _____

Years with Firm _____ Position _____

Income _____

Address _____

Supervisor _____ Phone _____

Previous Employer _____

Years with Firm _____ Position _____

Address _____

Supervisor _____ Phone _____

In Case of Personal Emergency, Please Notify:

Name _____	Relationship _____
Phone _____	
Address _____	

Required Attachments

- Move out Security Deposit of \$500.00 payable to Atlantic Condominium
- Move in Security Deposit of \$500.00 payable to the Atlantic Condominium
- Rental Lease
- Application fee of \$300.00 payable to Goldin Management, Inc.

Authorizations

I (we) hereby make an application for the rental of the above mentioned apartment and certify that the information presented in this application and the accompanying attachments is truthful. I (we) authorized you to verify any information presented in the application and to perform a credit search on me (us). We authorize you to release this information to the committee evaluating our application.

Applicant 1 _____ Date _____

Applicant 2 _____ Date _____