16 Market	Square North.	Suite	(For Office	I Ice	Only
10 Market	Suuare morui.	Suite	Troi Office	USE	OIII V

PLAINSBORO VILLAGE CENTER APARTMENT RENTAL APPLICATION

•This is an Equal Housing Opportunity •Each person over 18 must fill out a separate application •There is a non-refundable fee of \$65.00 to process EACH application, or \$75.00 for a combined spouse application •Please make checks payable to "SHARBELL CRANBURY, INC." (Only checks are accepted)								
The undersigned hereby makes	an applic	ation to rent the	following a	partment in	Building 12	, at 16 Marke	t Sq. N., Su	ite
, Plainsboro, NJ 0853	6, with an a	anticipated move	e-in date of		,20	_ at a month	ly rent of \$,
security deposit of \$	and pet de	posit of \$	and annu	ual insurand	ce fee of \$17	5.00.		
****ALL ITEMS MUST BE	FILLED II	N TO PROCES	S THE APP	LICATION	I – WRITE N	N/A IF NOT	APPLICAE	SLE****
I. PERSONAL INFORMATIO	J							
	ast	Date o	f Birth	Sex	Social Sec	urity No. or L	egal Alien	Card No.
		/	/	M/F				
Previous Names Used (A	liases)		Email A	ddress		Driver's Lic	ense No. a	nd State
				@				
Cell Phone		V	Vork Phone			Home	Phone	
ALL Other Proposed Occup	oants	Date of Birth	n Rel	ationship to	o Applicant	Cell F	Phone (18+	Only)
		/ /		•	••		•	•
		1 1						
		1 1						
		, ,						
		/ /						
PET INFORMATION (E Type/Breed/Weight (Lbs.)					antities of an eight (Lbs.)		e permitted reed/Weigh	
/ / /	туре/ы /	reed/Weight (Lbs	s.) 1 y <u>t</u>	/	eight (LDS.) /	туре/Б	reea/weigr	/ (LDS.)
1 1		/		/	/	/		/
II. RENTAL/RESIDENTIAL H	STORY	Common	4 Danislamas			Dries De	-:	
Addess		Curren	t Residence			Prior Res	siderice	
Address								
City								
State/ZIP								
Own a House? (Circle One)		Yes	/ No)		Yes I	No	
Last Monthly Rent or Mortgage Amount								
Landlord's Name								
Landlord's Phone Number								
Date of Residency – From:		/	/			/	/	
Date of Residency - To:		/			/	/		
Residential History Questions:	L Company		Yes/No		If Yes, Ple	ase Explain	Below:	
Have you had two or more late	rent or mo	rtgage						
	payments in the past year? Have you ever failed to pay rent or a monthly mortgage							
payment (including property ta	xes) in full	?						
Have you ever had any legal pr		ANY current or	1					

Page 1 of 3 www.sharbell.com

Plainsboro	Village Center	- Building 12 -	Rental Application

16 Market Square North, Suite	(For Office Use Only
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III.	CREDIT	HISTORY	

Accounts:	B	ank/Lende	r Name	Account Balance OR Balance Owed
Checking/Savings Accounts				
Credit Card 1				
Credit Card 2				
Auto, Student Loans, Etc.				
Auto, Student Loans, Etc.				
Questions:		Yes/No	If Y	es, Please Explain Below:
Have you declared bankruptcy in the past seven (7) years? If yes, what is the current status?				
Has a property owned by you ever been involved in a foreclosure proceeding in the past seven (7) years?				
We will request a credit report as part of the application. Is there anything negative we				

IV. EMPLOYMENT HISTORY

IV. EMPLOYMENT HISTORY			
	Current Employment*		Prior Employment*
Status: Full-Time/Part-Time/			
Unemployed (OR Student)			
Employer Name			
Job Title			
Address			
City, State, ZIP			
Supervisor's Name			
Supervisor or HR Dept.'s Phone Number			
Monthly Gross Income			
Date of Employment – From:	/ /		/ /
Date of Employment – To:	/ /		1 1
(If current, leave blank)	1 1		1 1
Question:			If Yes, Please Explain Below:
Do you have other lawful sources of income that you would like us to			
	ome, source, and person who we may		
	lo not have to reveal alimony, child		
	come unless you want us to consider it		
in this application.			
* If a alf a word a wasting	ad proof is required (i.e. W. 2 form		n Casial Casumity statement stal

^{*} If self-employed or retired, proof is required (i.e. W-2 form, pension, Social Security statement, etc.).

V. VEHICLE INFORMATION (Including Vehicles Belonging to Other Proposed Occupants):

Make	Model	Color	Year	License Plate (State/Number)
				/
				/
				/

Exhibit A to the Lease defines types of vehicles that are not permitted on the property. Please make sure your vehicle is permitted. Failure to do so will result in a denial of your application or can result in eviction if disclosure is not made at the time of application.

CONTINUED ON NEXT PAGE

Plainsboro Village Center – I	Building 12 - Rental Applicat	tion 16 Market S	Square North, Suite _	(For Office Use Only)	
VI. EMERGENCY CONTAC	CT (CANNOT BE A PROP Name	OSED OCCUPANT OF Address	THE UNIT): City	State/ZIP	
'	vanie	Audiess	Oity	Gtate/211	
Rela	ationship		Phone (Best Number	er to Use)	
			, , , , , , , , , , , , , , , , , , , ,		
VII. ADDITIONAL INFORM We will request a backgroun		nything negative we will f	ind? If yes, please e	xplain:	
Have you ever been convicte	d of a felony or are you on	any jurisdiction's sex off	ender database? If	yes, please explain:	
How did you hear about this	rental opportunity?				
Do you require the use of a '	service" animal? If yes, YC	OU MUST provide proof fr	om a licensed medic	al doctor	
Please give any additional in	formation that might assist	t in the evaluation of this	application:		
		AGREEMENT			
I (or We if submitting this the term and upon the set of We) certify that all statemer result in the rejection of this constitute a rental or lease a cover the cost of processing application is not approved.	onditions above set forth a ts above set forth are true application. I (or We) und agreement in whole or par my application and I (or \	and agree that the rent is and understand that an derstand that this is an a t. I (or We) further unde We) am not entitled to a	to be paid the first y discrepancy or lace oplication for an aparstand that there is refund even if my or	day of each month. I (or sk of information may artment and does not a non-refundable fee to my spouse's	
If approved, I (or we) agree period of one (1) year; and your procedure for processi information is obtained thro this application. This inquiry mode of living.	 pay the security depositing my (or our) application ugh personal interviews with 	and first month's rent pa , an investigative consun ith others with whom I (o	ayment. I (or We) re ner report will be pre r we) may be acqua	cognize that as a part of epared whereby inted or have listed in	
I (or We) also understand that proof of age (by affidavit or similar legal instrument and by valid government-issued identification) and legal residency (by valid government-issued identification) is required and that failure to provide required documentation will result in the denial of my (or OUR) application.					
The above information, to the	,				
Name (please print)	X		Doto.		
rianie (piease pillit)					
	BACKGROUND SEA	ARCH RELEASE AUTH	ORIZATION		
I authorize an investigation the purposes of renting an a <u>Background Search Releas</u> searches on behalf of Shark	apartment from Sharbell C e Authorization, provided l pell Cranbury, Inc., in orde	ranbury, Inc. I also under by TenantSafe, Inc., the or for my application to be	erstand that I must f company performin e processed.	ill out a separate	
Name (please print)	X Signature		 Date		
41 - 1 - 3	3				

APPLICANT: PLEASE DO NOT WRITE BELOW THIS LINE (FOR OFFICE USE ONLY)

Page 3 of 3 www.sharbell.com

OFFICE USE ONLY	Apt. Complex Name & Address:	Client Name-
APPLICATION FEE:\$		Acc. #

BACKGROUND SEARCH RELEASE AUTHORIZATION

Please Print Clearly (All fields must be completed in order to process application)

	•					
NAME	PHONI	E#				
ADDRESS		APT				
CITY	STATE	ZIP				
LANDLORDS NAME	PHONE	#				
PRIOR ADDRESS (List all from past	7 years including dates, use bad	ck if needed)				
SOCIAL SECURITY #						
DATE OF BIRTH						
CONTACT PERSON						
DATE EMPLOYED/ FromToPosition						
******FAX COMPLETED FOR	RM TO TENANTSAFE INC. AT	· (732) 370-1785				
		, , , , , , , , , , , , , , , , , , , ,				