



RENTAL APPLICATION

Required Documentation

1. Fully executed REBNY Condominium Lease (broker to provide)
2. Completed Rental Application (broker to provide)
3. Completed Background/Credit Reports (broker to provide)
4. Occupancy Rider (enclosed)
5. Notification of legal mailing (enclosed)
6. Emergency Contact Form (enclosed)
7. A letter to the Board of Managers advising them of a bona fide offer to rent the unit. The letter should include the terms of the contract and offer to rent such unit to the Board of Managers or its designee on the same terms and conditions.

Fee due with the Application

Processing Fee - \$350 money order or bank check payable to Harlem Property Management, Inc. due with submission of the application.

PLEASE SUBMIT the following:

- ONE (1) PDF file to info@harlempm.com
- ONE (1) completed set via snail mail to Harlem Property Management at our address below; Attn: Rental Application

While every effort will be made to expedite your application, please note that pursuant to the Condominium By-Laws, the Board has twenty (20) days to exercise or Waive the Right of First Refusal., Therefore, your application should be submitted at least thirty (30) days in advance. Please be sure your package is completed in its entirety as incomplete packages will not be processed. and will be returned for completion.



OCCUPANCY RIDER

BUILDING: _____ UNIT: _____

TENANT(S): _____

DATE OF LEASE/OWNERSHIP: _____

1. It is understood that the above mentioned apartment is to be used for residential purposes only by _____ . It is further understood and agreed that in the event this apartment is occupied by persons other than those names above, the Landlord may terminate this lease (if applicable) ownership.
2. Rules and Regulations – Lessee acknowledges that he/she has been provided with a copy of the Condominium’s current Rules and Regulations, and expressly agrees to abide by such Rules and Regulations and any amendments thereto.

By: _____
Tenant Signature



NOTIFICATION OF
LEGAL MAILING ADDRESS FOR UNIT OWNER

All correspondence and invoices concerning the ownership of Unit _____ should be sent to the following address rather than to the apartment.

Owner's Name: _____

Address: _____

Business Telephone Number: _____

Home Telephone Number: _____

Email Address: _____

270 Malcolm X Blvd * New York, New York 10027 * P: 212-280-6823 * F: 212-937-3351



EMERGENCY CONTACT/LEASE INFORMATION FORM

Occasionally, a maintenance problem or emergency will occur when it is imperative to contact the residents. Repair work can be hampered when residents are not at home and cannot be contacted. Extensive damage can be prevented if we can contact the occupants.

Please fill in the information below. We regret that move-ins will not be permitted unless this form is completed in its entirety. Thank you for your assistance

Tenant Name:

Unit #:

Phone:

Email address:

Emergency Contact Name:

Emergency Contact Number: _____

Lease Term: _____