



Thank you for choosing Tor View Village Apartments as your next home. We have prepared this information to help make the application process as easy as possible for you. In order to insure that the process goes smoothly and quickly, we ask that you read all of the requirements and provide all of the requested information. We are unable to accept any application that is not complete.

Application:

Complete with all phone numbers, addresses, dates and signed by all applicants.

Proof of Income:

Two most recent pay stubs, Pension stubs, or Disability checks. If starting a new job or transferring, a letter from the employer including starting salary and start date. If self employed we will accept the previous year tax return. Verifiable income provided to applicants by accredited social service agencies that provide benefits to people with disabilities will also be accepted.

Identification:

Valid Drivers License or Passport and Social Security Card.

Application Fee:

\$50 per applicant (over the age of 18). This fee is non-refundable and is applied to the cost of credit and background check. This fee should be made payable to Manhattan Management Company (MMC) by money order, cashier's check, Visa, Mastercard or Discover. We cannot accept personal checks or cash.

Deposit:

A deposit of \$200.00 payable to Manhattan Management Company (MMC) by money order, cashier's check, Visa, MasterCard or Discover is required to reserve an apartment until your application is approved. We cannot accept cash or personal checks.

Discounts:

We give 10% rental discount to Senior Citizens (age 62 and older), Teachers, and members of the Military (active duty). Proof of qualification for discount must be presented with application.

Please bring your completed application along with all required documents to our rental office. Our office hours are Monday to Friday from 9:00 am to 5:00 pm and Saturday from 10:00 am to 5:00 pm.

If it is more convenient, you may log on our website at www.torviewvillageapts.com and apply online or you may fax your application and documents to us at (845) 429-7439. Please be sure to include a copy of your credit card so we may process the application fee.

We will make every attempt to provide you with an answer as quickly as possible. **Typical processing time is 1-3 days.**

If you have any questions, please feel free to call us during the hours listed above at (845) 429-8222 or email at any time to torviewleasing@mngtco.com.



Tor View Village Residency Qualifications

Thank you for your interest in Tor View Village Apartments. We would like to explain the criteria we use to qualify applicants.

Employment/ Income- applicants should have six months of steady current employment that can be verified with a paycheck stub, income tax return, W-2 (if applicable to current job) or 1099 form. If not employed, proof of income in the form of assets or income such as pension, trusts etc. is required. Child support or alimony payments are considered if signed agreement or court order and proof of regular payments is provided. We will accept combined weekly salaries. Verifiable income provided to applicants by accredited social service agencies that provide benefits to people with disabilities will also be accepted. We use the following qualifying factor: Weekly income multiplied by 1.3 must equal monthly rent. Cosigners and Student loans will not be accepted as supplemental income.

- **Rental References-**applicant must have a favorable present and/or previous rental history. Negative history including late payments, failure to comply with leases, improper termination of residency, violence, harassment etc. is examples of but not the sole reason for rejection of an applicant.
- **Credit-**we obtain our credit reports through a national credit-reporting agency. A recent positive history is required. Negative credit items such as high credit balances, history of late payments, bankruptcy, liens, collections, and charge offs could result in a denial of an application.
- **Criminal Background Check-** we obtain criminal checks through a national criminal-check reporting agency. Felony or misdemeanor charges, (i.e., drug involvement, violence, harassment, prostitution, theft, etc.). Deferred adjudication for any such offense or probation for a felony is considered reasons for denial.

1Kensington Circle, Garnerville, NY 10923
Phone: (845) 429-8222 * Fax: (845) 429-7439
www.torviewvillageapts.com



Tor View Village Residency Qualifications

Security Deposit required is one and a half (1.5) month's rent. Payment should be made out to Manhattan Management Company (MMC) by money order, cashier's check or credit card. This payment is due at the lease signing.

Deposit of \$200.00 is required with the application to hold an apartment. This will be applied to your first month's rent. Deposits are refundable for 72 hours from receipt of payment. Providing all documentation is provided within a 72 hour time frame, if an application is not approved the deposit will be promptly returned. Once an application is approved, and the 72 hour time frame has expired, the deposit is non refundable. Payment should be made out to Manhattan Management Company by money order, cashiers check or credit card. No cash or personal checks.

Lease Term is 12 months.

Pets are accepted under the following conditions:

Two Pets per apartment

Breed restrictions apply

Pet lease rider must be signed

\$250 pet deposit per pet (refundable)

\$250 pet fee per pet (non-refundable)

\$25/month fee as added rent for 2nd pet

Pets are not permitted in apartments with brand new carpet

Pets 80lbs or more must reside on first floor

All shots and inoculations must be current

Recent close up picture of pet must be provided

Veterinarian statement must be provided

Summary of move in costs:

Application Fee	\$50 per applicant 18 and older (non refundable)
Deposit	\$200 (refundable within 72 hours)
Security Deposit	1.5 months
Pet Deposit	\$250 per pet (refundable)
Pet Fee	\$250 per pet (non-refundable)
Additional Pet Fee	2 nd pet - \$25/month rent increase



**TOR VIEW VILLAGE
A P A R T M E N T S**

APPLICATION FOR AN APARTMENT

****Please Print Clearly and Answer All Questions****

.....
Apartment You Are Applying For: _____
Apartment Selected _____ Waitlist _____

If Available Would You Prefer Non Smoking Building? Y__ N__

*** What Date Would You Like To Move-In By *** Date: ____/____/____

.....
If a resident or a friend referred you, then please list their full name and address:

Name: _____ Address: _____ City: _____ State: _____ Zip: _____

Phone # : _____

.....
LIST ALL PEOPLE THAT SHALL BE RESIDING IN YOUR APARTMENT - (Including Yourself) How Many? _____

*Please Choose Relationship for each occupant: [] Head of Household [] Co-Head of House [] Spouse/Partner [] Adult Family Member [] Roommate [] Minor Child

<u>NAME</u> <i>if 18 or older MUST complete Application Section</i>	<u>*RELATIONSHIP</u> <i>(see above)</i>	<u>BIRTH DATE</u>	<u>SOCIAL SECURITY #</u>
	Head of Household		

LIST ALL PETS: How Many # : _____

Type: _____ Name: _____ Breed: _____ Weight: _____ Color: _____

Type: _____ Name: _____ Breed: _____ Weight: _____ Color: _____

.....
WHOM DO WE CONTACT IN CASE OF EMERGENCY (Not living w/ you)

Full Name: _____ Relationship: _____ Phone #: _____

Address: _____ City: _____ State: _____ Zip: _____

IN THE EVENT OF SERIOUS ILLNESS, DEATH, OR OTHER CIRCUMSTANCES THAT WOULD MAKE YOU UNAVAILABLE, THE EMERGENCY CONTACT CAN REMOVE YOUR PROPERTY FROM YOUR UNIT OR COMMON AREAS. YES _____ NO _____

ALL OCCUPANTS WHO ARE 18 OR OLDER MUST COMPLETE THIS APPLICATION SECTION

#1 PRIMARY APPLICANT		APPLICANT or OCCUPANT #2	
Name:		Name:	
S.S. #: - -	Birth Date:	S.S. #: - -	Birth Date:
Drivers Lic #:	State:	Drivers Lic #:	State:
Home Phone #: () -		Home Phone #: () -	
Business Phone #: () -		Business Phone #: () -	
Cell Phone #: () -		Cell Phone #: () -	
E-Mail Address:		E-Mail Address:	
Current Address:		Current Address:	
City:	State: Zip:	City:	State: Zip:
Date Moved In:		Date Moved In:	
Present Monthly Rent/MTG : \$		Present Monthly Rent/MTG: \$	
Reason For Moving:		Reason For Moving:	
Current Landlord/Mortgage Name:		Current Landlord/Mortgage Name:	
Address:		Address:	
City:	State: Zip:	City:	State: Zip:
Phone #: () -	Fax #: () -	Phone #: () -	Fax #: () -
MUST BE COMPLETED IF ABOVE IS LESS THAN 3 YEARS		MUST BE COMPLETED IF ABOVE IS LESS THAN 3 YEARS	
Prior Address:		Prior Address:	
City:	State: Zip:	City:	State: Zip:
Date Moved In:	Date Moved Out:	Date Moved In:	Date Moved Out:
Prior Monthly Rent/MTG : \$		Prior Monthly Rent/MTG: \$	
Prior Landlord/Mortgage Name:		Prior Landlord/Mortgage Name:	
Address:		Address:	
Phone #: () -	Fax #: () -	Phone #: () -	Fax #: () -
Current Employer:		Current Employer:	
Supervisor:	Your Position:	Supervisor:	Your Position:
Gross Weeks Pay: \$	Date Started:	Gross Weeks Pay: \$	Date Started:
Address:		Address:	
City:	State: Zip:	City:	State: Zip:
Employer #: () -	Fax #: () -	Employer #: () -	Fax #: () -

NOTE: MUST COMPLETE ALL FIELDS

What is/was your reason for leaving your last home/apartment? _____

Are there any money judgments pending against any of the applicants? []Yes []No

Have any of the adult applicants ever declared bankruptcy? []Yes []No

Have any of the adult applicants ever been evicted or asked to move out? []Yes []No

Have any of the adult applicants ever been sued for non-payment of rent or damage to rental property? []Yes []No

Have any of the adult applicants ever broken a rental agreement or apartment lease? []Yes []No

Have any of the adult applicants ever received deferred adjudication for a crime? []Yes []No

Have any of the adult applicants ever been arrested, accused or convicted of any type of criminal offense? []Yes []No

(If Yes, Please Explain):

.....

I/We do hereby deposit \$_____, on this date:____/____/____, with the understanding that \$_____ is considered a Non-Refundable Credit Verification and Criminal Background Check charge.

APPLICANTS VERIFICATION; INITIALS: _____/_____/_____

I/We do hereby deposit \$_____, on this date:____/____/____, with the understanding that it is considered to be a Non-Refundable Reservation Deposit (if application is rejected deposit will be refunded) designed to hold a specific apartment (#_____) off the market until ____/____/____ unless I/we cancel the application, in writing, 72 hours after the deposit date. If I/we fail to take legal occupancy within the said time period, I understand and agree that I/we are obligated for any lost rent incurred from the foregoing date. This fee may be charged and/or forfeited by the Landlord for expenses incurred for holding an apartment and for office administration work.

APPLICANTS VERIFICATION; INITIALS: _____/_____/_____

Any deposit(s) made is subject to being collectible, and if returned as uncollectable, regardless of the reason, Maker/Payor is subject to a \$50.00 charge for each item returned.

AUTHORIZATION

I/We authorize Manhattan Management, LLC to verify the above information by all available means. Manhattan Management, LLC is not required to re-verify or investigate preliminary findings. I/We declare that the statements made in the application are true and correct and that any information contained in the application which is false, misleading or inaccurate shall be cause for rejection of the application and, if a lease had been entered into, shall constitute a breach of the lease, entitling Manhattan Management, LLC to terminate my or our tenancy. I/We agree that I/we will not file any claim or lawsuit relating to Managements use of my/our criminal record, credit report and/or any other verification listed above.

Applicant's Signature: Date: _____

Applicant's Signature: Date: _____

Applicant's Signature: Date: _____

Applicant's Signature: Date: _____

Leasing Agent's Signature: Date: _____

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