

Waterview Land Development LLC  
414 Main Street – Suite 202  
Port Jefferson, New York 11777  
tel. (631) 474-0946 fax (631) 474-8892



Date: \_\_\_\_\_

THE CHANNEL CLUB  
= LUXURY WATERFRONT APARTMENTS =

**Lease Application For**

Tower: \_\_\_\_\_ Apartment: \_\_\_\_\_

Represented by Broker Yes No Brokerage Company Name \_\_\_\_\_

**APPLICANT:**

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

# of years at this address: \_\_\_\_\_ Landlord's Name/Telephone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Employer: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Position: \_\_\_\_\_ How Long: \_\_\_\_\_ Annual Income: \_\_\_\_\_

**CO-APPLICANT:**

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

# of years at this address: \_\_\_\_\_ Landlord's Name/Telephone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Employer: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Position: \_\_\_\_\_ How Long: \_\_\_\_\_ Annual Income: \_\_\_\_\_

**OTHER OCCUPANTS:**

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

I/WE REPRESENT THAT THE OCCUPANCY OF THE APARTMENT WILL NOT CONSIST OF MORE THAN \_\_\_\_\_ PERSONS; OCCUPANCY OF THE APARTMENT BY MORE THAN \_\_\_\_\_ PERSONS AT ANY TIME, WITH THE EXCEPTION OF CHILDREN HEREAFTER BORN OR ADOPTED, SHALL CONSTITUTE A BREACH OF LEASE. INITIAL HERE: \_\_\_\_\_

**AUTO:**

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Color: \_\_\_\_\_ State: \_\_\_\_\_

License #: \_\_\_\_\_ Registered to: \_\_\_\_\_

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Color: \_\_\_\_\_ State: \_\_\_\_\_

License #: \_\_\_\_\_ Registered to: \_\_\_\_\_

Additional Vehicles: \_\_\_\_\_

**EMERGENCY CONTACT:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_

I/We represent that the information provided in this application true to the best of my knowledge. Commercial Management Group, Inc. and Waterview Land Development LLC are hereby authorized to verify my credit and employment references in connection with the processing of this application. I/we are providing herewith a non-refundable application fee of \$75.00 per applicant.

All aspects of this application are subject to the approval of Commercial Management Group, Inc. and Waterview Land Development LLC.

I/We deposit herewith \$ \_\_\_\_\_ as a good-faith deposit. If this application is accepted, this good-faith deposit will be applied to the security deposit and/or rent. If this application is accepted by Waterview Land Development LLC and I/we fail to return an executed lease along with the required certified funds due at signing within ten (10) days' receipt of the proposed lease, this application will be declined and the good-faith deposit shall be retained as liquidated damages.

Applicant Signature: \_\_\_\_\_ Dated: \_\_\_\_\_

Co-Applicant Signature: \_\_\_\_\_ Dated: \_\_\_\_\_



# Criminal Background Check

ALL FIELDS MUST BE COMPLETED

**APPLICANT INFORMATION:**

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

**CO-APPLICANT INFORMATION:**

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

APPLICANT(S) AGREES TO ALLOW WATERVIEW LAND DEVELOPMENT LLC AND COMMERCIAL MANAGEMENT GROUP, INC. TO PERFORM A STATE AND NATIONWIDE BACKGROUND CHECK.

**Applicant Signature:** \_\_\_\_\_ **Dated:** \_\_\_\_\_

**Co-Applicant Signature:** \_\_\_\_\_ **Dated:** \_\_\_\_\_

***THE FOLLOWING SECTION IS TO BE COMPLETED BY THE LEASING OFFICE***

**CUSTOMER INFORMATION:**

Company: \_\_\_\_\_

Return Fax Number: \_\_\_\_\_

Subscriber Name: \_\_\_\_\_

THE UNDERSIGNED CUSTOMER HEREBY ATTESTS THAT WRITTEN CONSENT HAS BEEN RECEIVED BY THE APPLICANT NAMED ABOVE FOR THE PURPOSE OF OBTAINING A CRIMINAL BACKGROUND CHECK. THE UNDERSIGNED ALSO AGREES TO HOLD INFORMATION IN STRICT CONFIDENCE AND THAT A COPY OF THE BACKGROUND CHECK IS NEVER TO BE GIVEN TO THE APPLICANT FOR WHICH IT IS BEING REQUESTED. FAILURE TO COMPLY WILL RESULT IN IMMEDIATE TERMINATION OF SERVICE WITHOUT WARNING AND THAT LANDLORD SERVICES CORP. WILL BE RELEASED OF ANY AND ALL LIABILITY.

**Customer Signature:** \_\_\_\_\_ **Dated:** \_\_\_\_\_