

Lordae Property Management  
1 New King Street  
West Harrison, NY 10604

Phone (914) 448-8300

[www.lordae.com](http://www.lordae.com)

Fax (914) 448-8356

Dear New Tenant,

We welcome you and wish you success in starting your new business. Please take a few moments and fill out the enclosed tenant information sheet.

It is important that we have this information as it is required by the management company.

Please refer to the enclosed letter in regards to your business insurance, the letter contains the entities that need to be listed as additionally insured on your policy. You must have the proper insurance as per your lease. Failure to comply could result in your lease being terminated, and, all deposits forfeited.

Additionally, enclosed is a list of your electric and/or gas meters, if applicable. You are responsible for setting up that account in your name directly with the electric/gas company.

Lastly, an electronic direct deposit form (ACH form) is enclosed, in order that your rent will be deducted every month, from your bank account.

You can e-mail completed forms to [tom@lordae.com](mailto:tom@lordae.com), mail to the above address, or fax to 914-448-8356. Please respond within thirty days of this notice.

Thank you in advance for your cooperation in this matter.

Very truly yours,

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Thomas R. Fitzgibbons

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Estimado Nuevo Inquilino,

Le damos la bienvenida y le deseamos éxito en el inicio de su nuevo negocio. Por favor tómese unos momentos para llenar la hoja adjunta de información del inquilino.

Es importante que tengamos esta información, ya que es requerido por nuestra compañía.

Por favor consulte la carta adjunta con respecto al seguro de su negocio. La carta contiene las entidades que deben ser añadidas y aseguradas en su póliza. Usted debe tener el seguro apropiado según su contrato de arrendamiento. El incumplimiento puede resultar en terminación de su contrato y perder todos los depósitos.

Adjunto también le enviamos la lista de medidores eléctricos y/o de gas, si es que aplica a su local. Usted es responsable de establecer las cuentas a su nombre con las compañías de utilidad que correspondan.

Por último, incluimos un formulario de depósito electrónico directo (formulario ACH) para que su renta sea deducida mensualmente de su cuenta bancaria.

Nos puede enviar los formularios completos por email a [tom@lordae.com](mailto:tom@lordae.com), por correo a la dirección de arriba de esta carta, o por fax al (914) 448-8356,. Por favor, responda dentro de los treinta días de este aviso.

Gracias de antemano por su cooperación en este asunto.

Atentamente,

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Thomas R. Fitzgibbons

**Lordae Property Management**  
**1 New King Street, Suite 201**  
**West Harrison, New York 10604**  
Phone: 914-448-8300

Required List of items needed to Transfer a Lease

Unit # \_\_\_\_\_

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

- Name and Address of lease being transferred: \_\_\_\_\_
- 

- Transfer fee in the amount listed within the lease. \_\_\_\_\_.  
(Current Tenant has security which can be used toward transfer fee.)
- New security in amount equal to three times the current rent.
- All rents and additional rents paid in full through current month. Current rental statement attached.
- Certificate of Liability Insurance naming landlord and related entities as additionally insured. Please see attached list of entities and refer to lease for amount and type of insurance needed.
- Proof of sale document
- Three original signed leases and/or Transfer Documents and signed guarantee
- Completed Lease application and tenant information form.
- All funds must be certified check, cash or bank check

The transfer of the lease will not be complete and final until all of the above items have been received by the landlord.

Thank You

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Christopher M. Santomero-Landlord

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Below is information you may find useful in performing your lease obligations.

- This is your Unit Code \_\_\_\_\_ Please write it in the note section of all payments sent to Lordae. It helps to ensure your payment is applied properly.
- All rental statements are sent out via email only. Please ensure that we have your current email address.
- Rent is due on the 1<sup>st</sup> of each month. Late after the 5<sup>th</sup> of the month and a Late fee will be assessed after the 10<sup>th</sup> on all unpaid rents.
- You are required to build out you store in a legal fashion. All required permits must be obtained and properly posted. You will be libel for any fines assessed against the property due to your negligent's.
- You are required to put any Electric & Gas meter accounts associated with your unit into you/ your business name within one week of the lease signing. Meter info will be supplied in your welcome package.
- You are required to have correct and current business insurance per your lease and the proper listing of the entities to be additionally insured per the letter send in you welcome package.
- You are required to have Three months' rent as security at all times. Rent increase usually occur January 1<sup>st</sup>. Please note this when paying your January statement
- If applicable to your lease. Real Estate Tax Reconciliation is billed out twice a year. June 1<sup>st</sup> and November 1<sup>st</sup>.
- If applicable to your lease Common Area Reconciliation is billed out once a year on March 1<sup>st</sup>.
- Your water use is monitored and will be reconciled and billed out on an ongoing manner.

**LORDAE PROPERTY MANAGEMENT**  
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**\*\*\*NEW TENANT INFORMATION\*\*\***

**UNIT #** \_\_\_\_\_

Congratulations on signing a new lease! We require the following additional information about your business.

BUSINESS NAME / NOMBRE DEL NEGOCIO

\_\_\_\_\_

BUSINESS ADDRESS / DIRECCIÓN DEL NEGOCIO

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

BILLING ADDRESS IF DIFFERENT FROM ABOVE / DIRECCIÓN DE CORREO SI ES DIFERENTE AL NEGOCIO

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

BUSINESS PHONE NUMBER / NÚMERO DE TELÉFONO DEL NEGOCIO

\_\_\_\_\_

FAX NUMBER / NÚMERO DE FAX

\_\_\_\_\_

BUSINESS TAX ID # / NÚMERO DE IDENTIFICACIÓN DEL EMPLEADOR

\_\_\_\_\_

STORE MANAGER OR ADDITIONAL CONTACT / GERENTE DEL NEGOCIO O CONTACTO ADICIONAL

\_\_\_\_\_

**\*\*\*IMPORTANT!** Your lease **REQUIRES** you to have a current **CERTIFICATE OF INSURANCE** on file with our office at all times. / Su contrato **REQUIERE** que tenga certificado de seguro con nosotros.

**\*\*\*Please also send a copy of your electric, gas, and water utility bills to the office for our records. / Por favor mandenos una copia de sus facturas de electricidad, gas, y agua.**

# LORDAE PROPERTY MANAGEMENT

1 New King Street · Suite 201 · West Harrison, NY 10604  
(914) 448-8300 · Fax (914) 448-8356 · leasing@lordae.com



## APPLICATION FOR TENANCY

ADDRESS OF UNIT FOR RENT / DIRECCIÓN DEL LOCAL

TODAY'S DATE / FECHA

YOUR NAME / NOMBRE

LEASING AGENT / AGENTE DE ARRENDAMIENTO

HOME PHONE / TELÉFONO DE HOGAR

DATE OF BIRTH / FECHA DE NACIMIENTO

CELL PHONE / NÚMERO DE CELULAR

SOCIAL SECURITY NUMBER / NÚMERO DE SEGURO SOCIAL

HOME ADDRESS / DIRECCIÓN DE HOGAR

E-MAIL ADDRESS / CORREO ELECTRÓNICO

DRIVER'S LICENSE / LICENCIA DE MANEJAR

STATE:	NUMBER:
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MAILING ADDRESS IF DIFFERENT FROM HOME / DIRECCIÓN DE CORREO SI ES DIFERENTE AL HOGAR

TYPE OF BUSINESS / TIPO DE NEGOCIO

STORE MANAGER OR ADDITIONAL CONTACT / GERENTE DEL NEGOCIO O CONTACTO ADICIONAL

INSURANCE BROKER NAME, ADDRESS, PHONE NUMBER / AGENTE DE SEGURO NOMBRE, DIRECCIÓN Y TELÉFONO

By signing this Acknowledgement and Authorization, I authorize Lordae LLC, and/or any other company authorized by Lordae LLC, to access such information as may be necessary to complete a credit history check, eviction history and/or criminal background check. I release from liability all persons and entities supplying such information. I indemnify Lordae LLC, and/or other company authorized by Lordae LLC, against any liability which may result from making such requests. I agree that a fax or photocopy of the Acknowledgment and Authorization with my signature will be accepted with the same authority as the original. I believe to the best of my knowledge that all information provided above is accurate, true and correct, and that I fully understand the terms of the Acknowledgment and Authorization.

\_\_\_\_\_  
SIGNATURE / FIRMA

## **Authorization Agreement for Direct Debit of Rent**

By signing below, I authorize Lordae Property Management to use my check information to create a monthly ACH direct debit of my account until such time as my tenancy is terminated or I revoke this permission in writing.

I understand and agree that the amount of the monthly debit will be my monthly rent plus any additional rents (e.g., water, CAM, taxes, etc.). I authorize Lordae to increase the amount of this debit in accordance with any rent increases scheduled in my lease agreement.

I understand Lordae may make the monthly debit between the 1<sup>st</sup> and the 10<sup>th</sup> of each month.

\_\_\_\_\_  
Tenant's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name (and company name if applicable)

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Please enclose a check from the account you want us to debit, OR fill in the following information:

Bank Name: \_\_\_\_\_

Bank Routing Number: \_\_\_\_\_

Bank Account Number: \_\_\_\_\_

Name on Account: \_\_\_\_\_

Is this a checking or savings account? \_\_\_\_\_