

RENTAL APPLICATION

- 1. Each Adult (18 or Older) Must Fill out a Separate Application
- 2. There is a non-refundable Fee of \$20.00 per Adult to apply. **"A Must"**

Renter's Information:

Name: _____

Address: (Street) _____

City: _____ State: _____ Zip _____

Contact Phone: _____ Cell Phone: _____

Email: _____

Any other Name used in the Pass: _____

What Date would like to Rent? _____ How Long would you like to Rent? _____

All Other Proposed Occupants (names)	Date of Birth	Age	Relationship to Applicant

Check the answer that applies to you:(optional) GENDER: Male Female RACE: Black White Hispanic Other

EMPLOYMENT

Current Employer: _____

Title: _____

Address: _____

Supervisor Name: _____ Phone Number: _____

REFERENCE (Non-Relative)

1.Name: _____

Address: _____

Phone Number: _____

Relationship to Applicant: _____ Years Known: _____

REFERENCE (Non-Relative)

2.Name: _____

Address: _____

Phone Number: _____

Relationship to Applicant: _____ Years Known: _____

RENTAL / RESIDENCE HISYORY (listed below):

Street Address			
City			
State & Zip			
Last Rent Amt. Paid			
Owner/ Manager Name & Phone			
Reason for Leaving			
IS / Was Rent Paid in full?			

	Previous Residence	Prior Residence	Current Resident
Were You Asked to Move?			
Did you give Notice?			
Names in Which your utilities are now billed:			
	From / To	From / To	From / To
Date of Residency?			

EMPLOYMENT HISTORY:

	Current Employment	Previous Employment	Prior Employment
Employed By:			
Address: (Street)			
City /State / Zip			
Employer Phone #:			
Occupation /Job Title			
Name of Supervisor			
Monthly Gross Pay.			
	From / To	From / To	From / To
Dates of Employment			

Credit History

Bank / Institution's Name

Saving Account				Balance ON Hand : \$
Checking Account				Balance On Hand : \$
Credit Card #1				Balance Owed : \$
Credit Card # 2				Balance Owed \$
Auto Loan				Monthly Payment \$
Mortgage Payment				Monthly Payment \$

VEHICLES (include vehicles belonging to other proposed occupants)

Make	Model	Color	Year	License's Plate

EMERGENCY CONTACTS

DOCTOR

LAWYER

NEAREST RELATIVE (LIVING ELSEWHERE)

NAME:			
Address: (Street)			
City :			
State / Zip:			
Email			
Phone Number (Home)			
Phone # (Cell)			

GENERAL INFORMATION:

Have you ever been served a late notice for Rent ? _____. Do you or other occupants Smoke?_____ (if so) **NO SMOKING INSIDE HOUSE!**

Have you ever been convicted of a felony?_____ Have you ever been served an Eviction Notice? _____

Do you have any Pets?_____ How many?_____. Age_____ Breed & Wt._____

Have you ever had any reoccurring problems with your current or pass Landlord? (If yes Explain)

Why are you moving from you current address?_____

Can We run a Credit Check and a criminal background screening? Yes____. NO____.

Is there any thing negative that you would like to comment on?_____

By signing the application you grant us permission to communicate with all the contacts listed on this application in the event we need to gain information about. Furthermore, If you get sick, expire or abandon the rental property for any reason, then you grant us permission to allow your relative listed to remove all contents of the dwelling on your behalf.

AGREEMENT & AUTHORIZATION SIGNATURE

I believe that the statements I have made are true and correct. I Hereby authorize a credit check and / or a criminal background screening, If needed, to verify all of the information that I have provided and communicate with any and all names listed on this application. I understand that any discrepancy or lack of information may result in the rejection of this application. I understand that there is a non-refundable fee of \$20.00 per adult occupant, to cover the cost of processing my application and I am NOT entitled to a refund, if I do not get the said property/ housing. Any questions or concerns, you may call (407) 927-1980 or Email: dependablenursing@peoplepc.com..

Applicant Signature

Date

Registration fee at the time of signing the Application (\$20.00)

Full payment after signing the application (\$600.+600= \$1200.)

		Total Deposit <u>\$600.00</u>	Total of 1st Month Rent <u>\$600.00</u>	Total Move -In Price: <u>\$ 1200.00</u>
<i>Please Make all Payment on time.....</i>				
			Total of Monthly Rent is \$600.00	