

# **RENTAL APPLICATION**

## **RESIDENT SELECTION CRITERIA**

**Application Requirements:** All adult applicants 18 or older must submit a fully completed, dated and signed residency application and fee. Applicant must provide a state issued photo identification card or a driver's license, and a social security card or proof of one. A non refundable application fee of \$50.00 cash or money order will be required for all adult applicants.

**Income Requirements:** Applicants must have a combined income of at least three (3) times the monthly rent. We reserve the right to require a co-signer. Self-employed applicants are required to produce, upon request, two years of tax returns or 1099's. Non-employed individuals must provide proof of income. All sources of other income must be verifiable if needed to qualify for a rental unit. Example: If the rent is \$750 it would be  $\$750 \times 3 = \$2,250$ . So your combined monthly gross income would have to be at least \$2,250.

**Credit reporting:** Our company policy is to report all non-compliances with the terms of your rental agreement or failure to pay rent as agreed, or any amounts owed to any or all of the various credit reporting agencies and to list your name in the Jacksonville Landlord tenant database.

**Background Investigation Requirements:** Criminal records must contain no convictions for felonies within the past seven years and no sexual offenses ever for any resident or family member that will be living in house. In the event a record comes back "adjudication withheld" further documentation may be required and applicant may be denied on this basis. Residents may not be on Specially Designated Nationals and Blocked Persons List (SDN List).

**Rental/Mortgage Requirements:** A minimum of two years residential history is required, if 2 years can not be verified may be required to put down additional deposit. Previous rental history from landlords must reflect timely payments, sufficient notice of intent to vacate, no complaints regarding noise, disturbance or illegal activities, no unpaid NSF checks, and no damage to unit or failure to leave the property clean and without damages at time of lease termination.

**Pet Policy:** No pets of any kind are permitted without specific written permission of landlord. Properly identified, trained, and managed pets may be allowed in certain properties. Additional rent and/or deposit will apply. Pet rent and/or deposits may be waived for medically necessary pets. (See Pet Policy For Additional Details).

**Holding or Good Faith Deposit Requirements:** Applicants will be required to pay a minimum of \$200.00 (available only for deposits over \$499) holding or good faith deposit within twenty four hours of being notified of acceptance or the dwelling unit will not be reserved for the approved applicant. We reserve the right to require an additional deposit and/or additional prepaid rent. We require a holding or good faith deposit to be collected to hold a property off the market for a maximum of 7 days. In the event the application is approved and applicant fails to enter into a lease, the applicant shall forfeit this deposit. In the event the application is approved, this deposit shall be applied to the required security deposit.

**Liquid Furniture:** Liquid furniture is acceptable provided that the home is structurally safe for the weight and the applicant provides proof of insurance naming the owner and property manager, if any, as beneficiary of any claim paid. The applicant will be responsible for 100% of any repairs and or replacements that are caused by liquid furniture malfunctions or abuse.

**Occupancy Requirements:** The number of occupants must be in compliance with HUD standards and guidelines for the applied unit. The standards are as follows:  
No more than 2 persons may occupy a 1 bedroom dwelling, No more than 4 persons may occupy a 2 bedroom dwelling, No more than 6 persons may occupy a 3 bedroom dwelling, and No more than 8 persons may occupy a 4 bedroom dwelling.

**No Verbal Agreements:** Any exceptions to our criteria must be submitted in writing to the landlord for consideration. If approval is then given for such exceptions, additional security, co-signers, and/or additional advance rent payments may be required. No verbal agreements will be executed or honored. Any agreements must be in writing and signed by both parties.

**By signing below, I indicate that I have read the above rental agreements and fully agree to the rental agreements. I hereby authorize the verification of all above criteria, including my credit, rental history, check writing and employment history. Failure to complete the application in full or submission of false information will be sufficient for rejection.**

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Landlord of Rental Agent Signature**

\_\_\_\_\_  
**Date**

## RENTAL APPLICATION

MONTHLY RENT AMOUNT: \_\_\_\_\_  
SECURITY DEPOSIT: \_\_\_\_\_  
APPLICATION FEE: \_\_\_\_\_  
PET DEPOSIT (NO REFUND): \_\_\_\_\_  
ADDITIONAL PET FEES: \_\_\_\_\_

ADDRESS YOU ARE APPLYING FOR: \_\_\_\_\_  
DATE OF DESIRED OCCUPANCY: \_\_\_\_\_  
ADDITIONAL COMMENTS: \_\_\_\_\_  
\_\_\_\_\_

### YOUR PERSONAL INFORMATION

***\*IT IS IMPORTANT THAT ALL INFORMATION BELOW IS GIVEN\****

#### **APPLICANT #1:**

DATE OF APPLICATION: \_\_\_\_\_  
NAME: \_\_\_\_\_,  
                    *LAST*                                    *FIRST*                                    *MIDDLE*  
DATE OF BIRTH: \_\_\_\_\_ SOCIAL SECURITY #: \_\_\_\_\_,  
DRIVERS LIC. #: \_\_\_\_\_ STATE: \_\_\_\_\_  
EMAIL (Must be Provided): \_\_\_\_\_  
CELL/HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_  
CHECKED BY: \_\_\_\_\_ APPROVED BY: \_\_\_\_\_

#### **APPLICANT #2:**

DATE OF APPLICATION: \_\_\_\_\_  
NAME: \_\_\_\_\_,  
                    *LAST*                                    *FIRST*                                    *MIDDLE*  
DATE OF BIRTH: \_\_\_\_\_ SOCIAL SECURITY #: \_\_\_\_\_,  
DRIVERS LIC. #: \_\_\_\_\_ STATE: \_\_\_\_\_  
EMAIL (Must be Provided): \_\_\_\_\_  
CELL/HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_  
CHECKED BY: \_\_\_\_\_ APPROVED BY: \_\_\_\_\_

#### **APPLICANT #3:**

DATE OF APPLICATION: \_\_\_\_\_  
NAME: \_\_\_\_\_,  
                    *LAST*                                    *FIRST*                                    *MIDDLE*  
DATE OF BIRTH: \_\_\_\_\_ SOCIAL SECURITY #: \_\_\_\_\_,  
DRIVERS LIC. #: \_\_\_\_\_ STATE: \_\_\_\_\_  
EMAIL (Must be Provided): \_\_\_\_\_  
CELL/HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_  
CHECKED BY: \_\_\_\_\_ APPROVED BY: \_\_\_\_\_

***\*LIST NAMES OF ALL OTHER PERSONS THAT WILL OCCUPY THIS RESIDENCE\*  
(ONLY THESE PERSONS WILL BE PERMITTED RESIDENCE)***

NAME: \_\_\_\_\_, RELATION: \_\_\_\_\_, DOB: \_\_\_\_\_  
NAME: \_\_\_\_\_, RELATION: \_\_\_\_\_, DOB: \_\_\_\_\_  
NAME: \_\_\_\_\_, RELATION: \_\_\_\_\_, DOB: \_\_\_\_\_  
NAME: \_\_\_\_\_, RELATION: \_\_\_\_\_, DOB: \_\_\_\_\_  
NAME: \_\_\_\_\_, RELATION: \_\_\_\_\_, DOB: \_\_\_\_\_

***\*RESIDENCE FOR THE LAST THREE (3) YEARS-LIST PRESENT RESIDENCE FIRST\****

PRESENT ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_  
MOVE IN DATE: \_\_\_\_\_ MOVE OUT DATE: \_\_\_\_\_  
LANDLORD/MANAGEMENT CO.: \_\_\_\_\_ PHONE: \_\_\_\_\_  
WHY MOVE?: \_\_\_\_\_  
IS RENT/MORTGAGE CURRENT?: \_\_\_\_\_ HOW MANY LATE PAYMENTS?: \_\_\_\_\_

PREVIOUS ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_  
MOVE IN DATE: \_\_\_\_\_ MOVE OUT DATE: \_\_\_\_\_  
LANDLORD/MANAGEMENT CO.: \_\_\_\_\_ PHONE: \_\_\_\_\_  
WHY MOVE?: \_\_\_\_\_

PREVIOUS ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_  
MOVE IN DATE: \_\_\_\_\_ MOVE OUT DATE: \_\_\_\_\_  
LANDLORD/MANAGEMENT CO.: \_\_\_\_\_ PHONE: \_\_\_\_\_  
WHY MOVE?: \_\_\_\_\_

***\*EMPLOYMENT FOR PAST TWO (2) YEARS-PRESENT JOB FIRST\****

PRESENT EMPLOYER: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_  
OCCUPATION: \_\_\_\_\_ SUPERVISOR: \_\_\_\_\_  
POSITION: \_\_\_\_\_ HOW LONG EMPLOYED (FROM/TO)? : \_\_\_\_\_  
MONTHLY INCOME: \_\_\_\_\_ AVERAGE WEEKLY HOURS: \_\_\_\_\_  
DATE WORKED FROM/TO: \_\_\_\_\_

PREVIOUS EMPLOYER: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_  
OCCUPATION: \_\_\_\_\_ SUPERVISOR: \_\_\_\_\_  
POSITION: \_\_\_\_\_ HOW LONG EMPLOYED (FROM/TO)? : \_\_\_\_\_  
MONTHLY INCOME: \_\_\_\_\_ AVERAGE WEEKLY HOURS: \_\_\_\_\_

DATE WORKED FROM/TO: \_\_\_\_\_

PREVIOUS EMPLOYER: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ SUPERVISOR: \_\_\_\_\_

POSITION: \_\_\_\_\_ HOW LONG EMPLOYED (FROM/TO)? : \_\_\_\_\_

MONTHLY INCOME: \_\_\_\_\_ AVERAGE WEEKLY HOURS: \_\_\_\_\_

DATE WORKED FROM/TO: \_\_\_\_\_

**\*ADDITIONAL SOURCES OF INCOME (OPTIONAL) – (e.g. SOCIAL SECURITY, ...)\***

SOURCE: \_\_\_\_\_ AMOUNT: \_\_\_\_\_

HOW OFTEN: \_\_\_\_\_ HOW LONG DO YOU EXPECT THIS TO CONTINUE: \_\_\_\_\_

**\*PERSONAL REFERENCES\***

NEAREST RELATIVE: \_\_\_\_\_, RELATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ HOME #: \_\_\_\_\_ WORK#: \_\_\_\_\_

**\*PERSONAL REFERENCES (NOT RELATED TO YOU)\***

NAME: \_\_\_\_\_, RELATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ HOME #: \_\_\_\_\_ WORK#: \_\_\_\_\_

NAME: \_\_\_\_\_, RELATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ HOME #: \_\_\_\_\_ WORK#: \_\_\_\_\_

NAME: \_\_\_\_\_, RELATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ HOME #: \_\_\_\_\_ WORK#: \_\_\_\_\_

**\*CREDIT REFERENCES (OPEN ACCOUNTS ONLY)\***

COMPANY: \_\_\_\_\_ ACCT #: \_\_\_\_\_ MO. PAYMENT \$ \_\_\_\_\_

COMPANY: \_\_\_\_\_ ACCT #: \_\_\_\_\_ MO. PAYMENT \$ \_\_\_\_\_

BANK NAME: \_\_\_\_\_ BRANCH: \_\_\_\_\_

CHECKING { Y or N } : \_\_\_\_\_ SAVING { Y or N } : \_\_\_\_\_ ACCT. #: \_\_\_\_\_

FAMILY ATTORNEY: \_\_\_\_\_ PHONE: \_\_\_\_\_

**\*VEHICLES-ONLY THESE WILL BE PERMITTED\***

MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ YR \_\_\_\_\_ TAG# \_\_\_\_\_ STATE: \_\_\_\_\_

MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ YR \_\_\_\_\_ TAG# \_\_\_\_\_ STATE: \_\_\_\_\_

MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ YR \_\_\_\_\_ TAG# \_\_\_\_\_ STATE: \_\_\_\_\_

MAKE\_\_\_\_\_MODEL\_\_\_\_\_YR\_\_\_\_\_TAG#\_\_\_\_\_STATE:\_\_\_\_\_  
MAKE\_\_\_\_\_MODEL\_\_\_\_\_YR\_\_\_\_\_TAG#\_\_\_\_\_STATE:\_\_\_\_\_  
MAKE\_\_\_\_\_MODEL\_\_\_\_\_YR\_\_\_\_\_TAG#\_\_\_\_\_STATE:\_\_\_\_\_

***\*PET INFORMATION\****

PLEASE LIST ANY PETS OR ANIMALS THAT YOU HAVE NOW OR INTEND TO HAVE DURING YOUR OCCUPANCY. UNLESS SPECIFICALLY ALLOWED IN THE LEASE AGREEMENT, PETS ARE NOT ALLOWED ON THIS PREMISES. ALL PET'S REQUIRE OWNER'S WRITTEN CONSENT.

DO YOU OWN A PET? {Y or N}:\_\_\_\_\_ HOW MANY:\_\_\_\_\_  
BREED:\_\_\_\_\_ WEIGHT:\_\_\_\_\_  
COLOR:\_\_\_\_\_ RABIES VACCINATION?:\_\_\_\_\_ CURRENT:\_\_\_\_\_  
BREED:\_\_\_\_\_ WEIGHT:\_\_\_\_\_  
COLOR:\_\_\_\_\_ RABIES VACCINATION?:\_\_\_\_\_ CURRENT:\_\_\_\_\_  
BREED:\_\_\_\_\_ WEIGHT:\_\_\_\_\_  
COLOR:\_\_\_\_\_ RABIES VACCINATION?:\_\_\_\_\_ CURRENT:\_\_\_\_\_  
IF YOU DO NOT HAVE A PET DO YOU ANTICIPATE GETTING ONE? {Y or N}:\_\_\_\_\_  
HAS YOUR PET EVER BITTEN ANYONE? {Y or N}:\_\_\_\_\_

IF YES, YOU MUST GIVE LANDLORD/MANAGEMENT COMPANY ALL INFORMATION ON PET BEFORE YOU GET THE PET. THE FOLLOWING BREEDS OF DOGS WILL NOT BE ALLOWED ON THE RENTAL PROPERTY: PITBULL, CHOW, ROTWEILER, DOBERMANS, HUSKY, WOLF HYBRID AND GERMAN SHEPARDS. THIS IS BECAUSE OF INSURANCE REGULATIONS. IF IT IS A MUT OR MIXED BREED VERIFICATION OF THE BREED MUST BE PROVIDED BY A VETERINARIAN.

***\*ADDITIONAL INFORMATION\****

HAVE YOU EVER HAD ADJUCATION WITHHELD OR BEEN CONVICTED OF A FELONY? {Y or N}:\_\_\_\_\_  
IF YES, PLEASE EXPLAIN AND SPECIFY THE ACTIONS, USE ADDITIONAL SHEETS IF NECESSARY: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HAVE YOU EVER BEEN EVICTED? {Y or N}:\_\_\_\_\_  
IF YES, PLEASE EXPLAIN AND SPECIFY THE ACTIONS, USE ADDITIONAL SHEETS IF NECESSARY: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HAVE YOU EVER LEFT A PROPERTY WITHOUT GIVING A WRITTEN NOTICE? {Y or N}:\_\_\_\_\_

IF YES, PLEASE EXPLAIN AND SPECIFY THE ACTIONS, USE ADDITIONAL SHEETS IF NECESSARY: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HAVE YOU EVER HAD A RENTAL DEPOSIT NOT RETURNED? {Y or N}:\_\_\_\_\_  
HAVE YOU EVER BROKEN A RENTAL OR LEASE AGREEMENT? {Y or N}:\_\_\_\_\_  
HAVE YOU EVER BEEN SUED FOR NONPAYMENT OF RENT? {Y or N}:\_\_\_\_\_  
HAVE YOU EVER BEEN SUED FOR DAMAGES TO A RENTAL PROPERTY? {Y or N}:\_\_\_\_\_

HAVE YOU EVER FILED FOR BANKRUPTCY OR HAD A FORECLOSURE FILED AGAINST YOU? {Y or N}:\_\_\_\_\_  
IF YES, PLEASE EXPLAIN AND SPECIFY THE ACTIONS, USE ADDITIONAL SHEETS IF NECESSARY: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DO YOU, OR ANY INTENDED OCCUPANTS SMOKE? {Y or N}:\_\_\_\_\_  
IF REQUIRED, ARE YOU WILLING TO SMOKE OUTDOORS ONLY? {Y or N}:\_\_\_\_\_

DO YOU OWN A VACUUM CLEANER? {Y or N}:\_\_\_\_\_

DO YOU OWN A LAWN MOWER? {Y or N}:\_\_\_\_\_

DID YOU HAVE ANY PROBLEMS AT YOUR LAST RESIDENCE, IF SO EXPLAIN?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WHAT DO YOU NOT LIKE ABOUT YOUR CURRENT RESIDENCE?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

WHAT DO YOU LIKE BEST ABOUT YOUR CURRENT RESIDENCE?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IS YOUR CREDIT GOOD, FAIR OR UGLY? : \_\_\_\_\_

***\*RENTAL DEPOSIT AGREEMENT\****

APPLICANT REPRESENTS THAT ALL OF THE STATEMENTS AND REPRESENTATIONS ARE TRUE AND COMPLETE, AND HEREBY, AUTHORIZES

VERIFICATION OF THE ABOVE INFORMATION, REFERENCES, BACKGROUND CHECK AND CREDIT RECORD. APPLICANT UNDERSTANDS THAT AN INVESTIGATIVE CONSUMER REPORT INCLUDING INFORMATION ABOUT CHARACTER, CREDIT HISTORY, GENERAL REPUTATION, PERSONAL CHARACTERISTICS, MODE OF LIVING, AND ALL PUBLIC RECORD INFORMATION INCLUDING CRIMINAL RECORDS MAY BE MADE. APPLICANT AGREES THAT FALSE, MISLEADING OR MISREPRESENTED INFORMATION MAY RESULT IN THE APPLICATION BEING REJECTED, WILL VOID A LEASE/RENTAL AGREEMENT IF ANY AND/OR BE GROUNDS FOR IMMEDIATE EVICTION WITH LOSS OF ALL DEPOSITS AND ANY OTHER PENALTIES AS PROVIDED BY THE LEASE TERMS, IF ANY. APPLICANT AUTHORIZES VERIFICATION OF ALL INFORMATION BY THE LANDLORD AND OR MANAGEMENT COMPANY. APPLICANT HAS THE RIGHT TO MAKE A WRITTEN REQUEST WITHIN 3 DAYS OF TO RECEIVE ADDITIONAL DETAILED INFORMATION ABOUT THE NATURE AND SCOPE OF THIS INVESTIGATION.

***\*APPLICANT ACKNOWLEDGES\****

APPLICANT ACKNOWLEDGES THAT ONCE THE APPLICATION IS APPROVED A LEASE MUST BE SIGNED WITHIN 3 DAYS AND A SECURITY DEPOSIT RECEIVED. TENANT FAILS TO TAKE POSSESSION AFTER THE LEASE SIGNING, THE FULL SECURITY DEPOSIT, PLUS ANY RENT MONIES PAID, SHALL BE FORFEITED. IN ADDITION ANY PENALTIES PROVIDED FOR IN THE LEASE AGREEMENT, SIGNED BY THE APPLICANT SHALL APPLY.

TENANTS WILL NOT BE ACCEPTED ON A "FIRST-COME, FIRST SERVED" BASIS. ALL PROSPECTIVE TENANTS WILL BE SCREENED, AND A DECISION MADE BASED ON THE APPLICANT'S QUALIFICATIONS, INCLUDING INFORMATION OBTAINED IN THE BACKGROUND/CREDIT CHECK, AS WELL AS THE OWNER'S NEEDS. TENANTS UNDERSTANDS THAT OWNER CARRIES NO INSURANCE FOR THE DOGS AND/OR PETS OR FOR PERSONAL BELONGINGS OR FOR THE POSSESSIONS OF THE TENANT'S AND THEIR GUESTS. TENANTS ARE ENCOURAGED TO CARRY THEIR OWN RENTERS' INSURANCE POLICY FOR MAXIMUM PROTECTION.

PURSUANT TO FLORIDA STATUTES 475 YOU ARE NOTIFIED THAT LISTING AND RENTAL AGENTS AND AGENCIES THAT REPRESENT THE OWNER IN THIS TRANSACTION. THE UNDERSIGNED FURTHER CERTIFIES THAT THIS NOTICE WAS RECEIVED PRIOR TO ENTERING INTO ANY CONTRACTUAL AGREEMENT.

RADON GAS: RADON IS A NATURALLY OCCURING RADIOACTIVE GAS THAT WHEN IT HAS ACCUMULATED IN A BUILDING IN SUFFICIENT QUANTITIES, MAY PRESENT HEALTH RISK TO PERSONS WHO ARE EXPOSED TO IT OVER TIME. LEVELS OF RADON THAT EXCEED FEDERAL AND STATE GUIDELINES HAVE BEEN FOUND IN BUILDINGS IN FLORIDA. ADDITIONAL INFORMATION REGARDING RADON AND RADON TESTING MAY BE OBTAINED FROM THE COUNTY PUBLIC HEALTH UNIT.

A NON-REFUNDABLE FEE OF \$50.00 IS REQUIRED FOR PROCESSING THIS APPLICATION

RECEIPT OF \$ 50.00 FROM APPLICANT ACKNOWLEDGED AS PROCESSING CHARGE, SECURITY DEPOSIT, OR RENT (ONE OR ALL OF THE ABOVE). ALL MONIES RECEIVED HAVE TO BE DEPOSITED INTO A BANK INSTITUTION UPON RECEIPT IN ACCORDANCE TO FLORIDA STATUTES 475. ACCEPTANCE OF APPLICATION AND ANY MONIES DEPOSITED HERewith ARE NOT BINDING UPON LANDLORD, UNTIL APPLICATION IS APPROVED BY LANDLORD/AGENT. IF LANDLORD/AGENT FAILS TO NOTIFY APPLICANT EITHER BY PHONE, MAIL OR EMAIL (APPLICANTS PRESENT ADDRESS) WITHIN THREE (3) WORKING DAYS OF REJECTION, APPLICANTS SHALL BE PRESUMED APPROVED. IF NOT APPROVED LANDLORDING/AGENT WILL RETURN ALL MONIES RECEIVED (EXCEPT FOR PROCESSING CHARGE) TO APPLICANT UPON ALL MONIES BEING CLEARED BY BANK. IF APPROVED, ALL MONIES GIVEN HERewith EXCEPT FOR PROCESSING CHARGE INDICATED ABOVE SHALL BE APPLIED TO SECURITY DEPOSIT, OR RENT, OR BOTH. AT THE TIME OF RENTAL AGREEMENT IS EXECUTED, ANY ADDITIONAL SECURITY DEPOSIT, OR RENT, OR BOTH WILL BE PAID. IF APPLICANT FAILS TO EXECUTE A RENTAL AGREEMENT OR REFUSES TO OCCUPY RENTAL AS STATED ON MOVE IN DATE, ALL MONIES GIVEN HERewith SHALL BE RETAINED BY LANDLORD/AGENT AS LIQUIDATED DAMAGES.

I/WE CERTIFY THAT THE INFORMATION GIVEN HEREIN IS COMPLETE, TRUE AND CORRECT, AND AGREE TO THE PROVISIONS AS STATED. LANDLORD/AGENT IS HEREBY EXPRESSLY AUTHORIZED TO VERIFY THE ACCURACY AND CORRECTNESS OF THIS STATEMENT, TO COMMUNICATE WITH MY / OUR EMPLOYER AND CREDITORS, AND TO PROCURE SUCH OTHER INFORMATION (CREDIT REPORT, ETC.) WHICH MUST BE SIGNED BEFORE IT CAN BE PROCESSED. ANY FALSE INFORMATION GIVEN WILL CONSTITUTE GROUNDS FOR REJECTION OF APPLICATION.

I AUTHORIZE LANDLORD/AGENT TO DEPOSIT \$       .00 ON RENTAL & APPLY IT TOWARDS A SECURITY DEPOSIT, OR RENT OR BOTH OF \$       .00

\_\_\_\_\_  
MANAGER  
William H Armel IV,  
Property Manager

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

IN ACCORDANCE WITH STATE AND FEDERAL LAWS, THIS IS TO INFORM YOU THAT A CONSUMER INVESTIGATION INVOLVING STATEMENTS MADE ON THIS APPLICATION IS BEING INITIATED.

I OR WE \_\_\_\_\_ THE UNSERSIGNED AUTHORIZE THE SCREENING AGENCY OR LANDLORD/AGENT TO RUN AN INVESTIGATION



CONSUMER REPORT AND VERIFICATION OF ANY AND ALL INFORMATION RELATING TO RESIDENTIAL HISTORY (RENTAL OR MORTGAGE), EMPLOYMENT HISTORY, CRIMINAL HISTORY RECORDS, COURT RECORDS AND CREDIT RECORDS TO BE PROVIDED. WE OR I RELEASE ANY AGENCY, INSTITUTION AND ESTABLISHMENT AND THEIR ASSOCIATES, ITS OWNERS, AGENTS EMPLOYEES & ASSIGNS, FOR AND FROM ALL MANNER OF ACTION AND ACTIONS, CAUSE AND CAUSES OF ACTIONS SUITS, DAMAGES, JUDGEMENTS, CLAIMS AND DEMANDS WHATSOEVER OF ANY DAMAGES OR CLAIMS RESULTING FROM CREDIT CHECK, POLICE BACKGROUND CHECK, EVICTION CHECK.

\_\_\_\_\_  
MANAGER  
William H Armel IV,  
Property Manager

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE