

APPLICATION FOR RESIDENCY

PLEASE FILL OUT COMPLETELY - THANK YOU

Please Tell Us about Yourself

Applicant		Last		First		Middle		Maiden		Date of Birth		Social Security #		Driver's License #					
Marital Status		Present Phone No. ()				9:00 to 5:00 CONTACT PHONE NO.: () Ext.													
Have you ever had an eviction filed against you?		Yes		No		PETS (Keeping of pets requires a pet deposit and owner's consent)													
Present Address		Street #		Name		Apt. #		City		State		Zip		Rent/Mortgage Pymt		Own Rent		Since / /	
Landlord Mtg. Co.		Name		Address		City		State		Zip		Phone No. ()							
Previous Address		Street #		Name		Apt. #		City		State		Zip		Rent/Mortgage Pymt		Own Rent		Since / /	
Have you or any occupants ever been arrested for, convicted of, put on probation for, or had adjudication withheld or deferred for a felony offense?										Yes		No		If yes, please explain					

Please Tell Us about Your Job

Present Employer		Name		Business Address		City		State		Phone No. ()	
Position		Supervisor		Monthly Income		From / /		to / /			
Previous Employer		Name		Business Address		City		State		Phone No. ()	
Position		Supervisor		Monthly Income		From / /		to / /			

Please Give Us the Following Information

Emergency Contact		Name		Full Address		Phone No. ()							
Automobile 1 st Car		Year		Make		Model		Color		Tag #			
Automobile 2 nd Car		Year		Make		Model		Color		Tag #			
Children Occupying		Name		Age		Name		Age		Name		Age	
Bank Ref		Name		Location		City		State					

Applicant represents that all of the statements and representations are true and complete, and hereby, authorizes verification of the above information, references and credit records. 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 **Urette & Associates**. Applicant has the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation. **NON REFUNDABLE APPLICATION FEE**--Applicant(s) has paid to Landlord and/or Management company herewith the sum of **\$150.00** as a **NON REFUNDABLE APPLICATION FEE** for costs, expenses and fees in processing the application. **SECURITY DEPOSIT AGREEMENT** -- Applicant has deposited an **"GOOD FAITH DEPOSIT"** of **\$** in consideration for taking the dwelling off the market while the application is being processed. If applicant is approved by Landlord and/or Management, **"GOOD FAITH DEPOSIT"** becomes the **"SECURITY DEPOSIT"** and the lease is entered into and possession of the apartment is taken the **"SECURITY DEPOSIT" shall be applied toward the security/ damage deposit.** If applicant is approved, but fails to enter into the lease within 3 days of verbal and/or written approval and/or take possession after lease signing, the **FULL "SECURITY DEPOSIT"** shall be forfeited to the Landlord or Management in addition to any penalties as provided in the lease if the lease has been signed by the applicant. The **"SECURITY DEPOSIT"** shall be refunded only if applicant is not approved. Keys will be furnished only after lease and other rental documents have been properly executed by all parties and only after applicable rentals and security deposits have been paid. This application is preliminary only, in no way implies that a particular rental unit shall be available and in no way obligates Landlord or Management to execute a lease or deliver possession of the proposed premises.

I HAVE READ AND AGREE TO THE PROVISIONS AS STATED

Applicant Signature _____ Date _____

Email Address _____

SECURITY DEPOSIT	\$ _____	OFFICE USE ONLY This form must be submitted to U&A 17427 Bridge Hill Court Ste C Tampa, FL 33647 UNIT _____ PREV RENT _____ W/T/S _____ W/D _____ TOTAL PREV RENT \$ _____ APPROVED BY: _____
RENT	\$ _____	
W/T/S	\$ _____	
W/D	\$ _____	
TOTAL MONTHLY RENT	\$ _____	
PET FEE	\$ _____	
CREDIT CHECK FEE	\$ 150.00 _____	
PAID WITH APPLICATION	\$ _____	
BALANCE OF DEPOSIT DUE	\$ _____	
TOTAL DUE BEFORE MOVE-IN	\$ _____	
TERM OF LEASE _____		
MOVE-IN DATE _____		
LEASE END DATE _____		