



APPLICATION FOR RESIDENCY

PLEASE FILL OUT COMPLETELY - THANK YOU

Please Tell Us About Yourself

Applicant					Date of Birth	
Last		First		Middle		Maiden
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? <input type="checkbox"/> Yes <input type="checkbox"/> No
PETS (Keeping of pets requires a pet deposit and owner's consent)			Breed		Age	Weight
Present Address		Street #		Name		Apt. #
						City
						State
						Zip
<input type="checkbox"/> Own	<input type="checkbox"/> Rent	Since		/	/	Rent/Mortgage Pymt
Landlord Mtg. Co		Name		Address		City
						State
						Zip
Landlord / Mtg. Co. Phone No.						
Previous Address		Street #		Name		Apt. #
						City
						State
						Zip
<input type="checkbox"/> Own	<input type="checkbox"/> Rent	Since		/	/	Rent/Mortgage Pymt
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? <input type="checkbox"/> Yes <input type="checkbox"/> No						
If yes, please explain						

Please Tell Us about Your Job

Present Employer		Name		Business Address		City	State	Zip
Employer Phone No.								
Position			Supervisor			Monthly Income		From / / To / /
Previous Employer		Name		Business Address		City	State	Zip
Employer Phone No.								
Position			Supervisor			Monthly Income		From / / To / /

Florida Golf Homes, Realtors®
407.864.6218 or 800.716.4105
Fax: 1.866.428.5743
rentals@yourfloridagolfhome.com



APPLICATION DISCLOSURE FORM

PLEASE FILL OUT COMPLETELY AND SIGN

**Fax With A Copy Of Your Driver's License To 1.866.428.5743
Or Email To rentals@yourfloridagolfhome.com**

A Separate Form Is Required For Each Applicant

Address Of Rental

Applicant's Name

Daytime Phone

Home Phone

Address

City

State

Zip

Social Security Number

Date Of Birth

Driver's License #/State

I authorize Florida Golf Homes, Realtors and Acurate Credit Bureau to obtain my consumer credit report and public records and to investigate any personal information on me necessary to arrive at an application decisions.

Signature

Date

**Did you remember to attach a legible copy of your driver's license?
We can not process any applications without a valid picture ID Attached.**

**** WARNING/CONFIDENTIAL****

This message is intended for the use of the individual or entity to which it is addressed and may contain information that is privileged, confidential and exempt from disclosure under applicable law. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is prohibited. If you have received this communication in error, please notify the sender by telephone immediately (407) 864-6218. Thank you for your cooperation.

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Please Give Us The Following Information

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

***Occupying Adults (18 Or Older) Other Than Applicant**

Last	First	Middle	Date of Birth	Social Security#
Last	First	Middle	Date of Birth	Social Security#

* All occupants over the age of 18 must sign the application thereby giving their consent to background investigation. Any person who will be signing the lease must complete a separate application and pay an application fee.

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 the Landlord and or Management Company. 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 **\$65.00** as a **NON-REFUNDABLE APPLICATION FEE** for costs, expenses and fees in processing the application. 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. **All decisions regarding acceptance of any applicant for tenancy rests solely with the Landlord.**

I HAVE READ AND AGREE TO THE PROVISIONS AS STATED

Mail Form To: Florida Golf Homes, Realtors
8297 Championsgate Blvd. #352
Championsgate, FL 33896

Email Form To: rentals@yourfloridagolfhome.com
Fax Form To: 1-866-428-5743

Applicant Signature Date

*Applicant Signature Date

*Applicant Signature Date

