APPLICATION FOR RESIDENCY – PEPPERTREE VILLAGE APTS.

321 Imperial Blvd. Lakeland, FL 33803 Phone: 863-646-5069 Fax: 863-647-4614

Applicant

Name _____
Last First MI Jr/Sr Prior

SS# _____/_____/_____ DOB _____/_____/_____

Home Phone # ( ) _____ _____
Mo. Day Yr.

Drivers Lic._____ State _____

Present Employer _____
Name

_____ _____
City State **Phone No**.

_____ Income $ _____ Per _____
Position

Employed ___/___/___ to ___/___/___ Mgr. _____

Previous Employer _____
Name

_____ _____
City State **Phone No**.

_____ Income $ _____ Per _____
Position

Employed ___/___/___ to ___/___/___ Mgr. _____

Present Address

Address _____
Street Apt.# City State Zip Code

_____ _____
Mortgage Holder/Landlord **Phone No**.

Length of residence ____/____/____ to ____/____/____

Monthly Rent/Mortgage $ _____ Mortgage Acct# _____

Previous Address

Address _____
Street Apt.# City State Zip Code

_____ _____
Mortgage Holder/Landlord **Phone No**.

Length of residence ____/____/____ to ____/____/____

Monthly Rent/Mortgage $ _____ Mortgage Acct# _____

_____ _____
Why are you moving? Who referred you to our community?

_____ _____
Why did you decide to rent here? Move-In Date

Spouse

Name _____
Last First MI Jr/Sr Maiden

SS# _____/_____/_____ DOB _____/_____/_____
Mo. Day Yr.

Drivers Lic _____ State _____

Present Employer _____
Name

_____ _____
City State **Phone No**.

_____ Income $ _____ Per _____
Position

Employed ___/___/___ to ___/___/___ Mgr. _____

Previous Employer _____
Name

_____ _____
City State **Phone No**.

_____ Income $ _____ Per _____
Position

Employed ___/___/___ to ___/___/___ Mgr. _____

VEHICLE INFORMATION:

Make:_____ Model:_____ Year:_____ Tag#:_____

Make:_____ Model:_____ Year:_____ Tag#:_____

Pets

Number ____ Type _____ Breed _____ Weight ____ Age___

Number ____ Type _____ Breed _____ Weight ____ Age___

Additional Occupants

_____
Name Relationship / Age SS#

_____
Name Relationship / Age SS#

Other Income

$ _____ Per _____ Source _____

Bank Information

_____ Acct# _____
Name Branch City State

For Emergency _____
Name Relationship

_____ ( ) _____
Address Phone

Have you **left** owing money to landlord/owner? Yes___ No___

Have you been arrested or convicted of a felony? Yes___ No___

Have you applied for residency in the past 2 yrs, but did not move in? Yes___ No___

If you have answered yes to any of the questions in the left hand box ... please explain the circumstances regarding the situation on the back of this paper.

AUTHORIZATION OR RELEASE OF INFORMATION Applicant(s) represents that all of the above information and statements on the application for rental are true and complete, and hereby authorizes verification of any and all information relating to residential history (rental or mortgage), employment history, criminal history and records, court records, and credit records. Applicant acknowledges that false or omitted information herein may constitute grounds for rejection of this application, termination of right of occupancy, and/or forfeiture of fees or deposits and may constitute a criminal offense under the laws of the State.

NON-REFUNDABLE APPLICATION FEE Applicant(s) agree to pay 35**.00 for a non-refundable application-processing fee.**

APPLICATION RESERVATION FEE AGREEMENT Applicant has paid an "application reservation fee" of **$250.00** in consideration of taking the dwelling unit off the market while considering the approval of this application. If applicant(s) is approved and the contemplated lease is entered into, then on the day of move in the application reservation fee will be credited towards payment of the security deposit amount of **$200.00 plus a redecorating fee of $50.00.** If the applicant(s) is approved but fails to promptly enter into the contemplated lease or fails to move in on the agreed upon date, the application reservation fee will be retained by owner as liquidated damages. The application reservation fee will only be refunded if the applicants cancel this application with **written notice within 72 hours**, or if application is not approved, refunds will be sent via mail within 30 days of cancellation. This application is preliminary only and does not obligate owner or owner' agent to execute a lease or deliver possession of the proposed premises. No oral agreements have been made.

_____ _____ _____ _____
Applicant's Signature Date Spouse's Signature Date

APPROVED _____ NOT APPROVED _____ Manager's Signature _____

Leasing Consultant _____ App. Rec'd _____/_____/_____ Apt # _____ Monthly Rent $ _____ Type ___

Security Deposit $ _____ Pet Deposit $ _____ Move-In Date _____/_____/_____ Lease Term _____ Months