

## **RENTAL APPLICATION**

Thank you for applying to rent with us. Please provide us with all the information requested below. Incomplete information will only delay the processing of your Rental Application. PLEASE PRINT CLEARLY!

FULLNAME:	SS#	DATE	OF BIRTH//				
ver License # State of License Issue							
PHONE: ( ) ( ) ( ) Wo	ORK ( )(		Email address				
SPOUSE:	SS#	DATE OF BIR	ГН//				
Driver License #	State of Licer	nse Issue					
PHONE: ( ) ( ) ( ) (	ORK ( )(	l #1 I	Email address				
ALL OTHERS OCCUPANTS:							
FULL NAME AG	<u>RE</u>	_ATIONSHIP					
RENTAL HISTORY  1) CURRENT ADDRESS							
NUMBER STREET	APT. NO. CITY	STATE	ZIP				
FROM:TO:AMOUNT RENT	PAIDAPT. COMPL	EX NAME:					
OWNER/MGR							
FULL NAME NUMBER  OWNER/MGR OR  MORTGAGE CO. PHONE# ( )	STREET AF						
2) I NEVIOUS ADDICEOU.							
NUMBER STREET AF	PT. NO. CIT	Y STATE	ZIP				
FROM:TO:AMOUNT RENT	PAIDAPT. COMPL	EX NAME:					
OWNER/MGRFULL NAME NUMBER	STREET APT. NO.	CITY STATE	ZIP				
OWNER/MGR OR MORTGAGE CO. PHONE# ( )	REASON FOR LEAVIN	G					
EMPLOYMENT: CURRENT EMPLOYER: AD	DDRESS:						
COMPANY NAME	STREET CIT	Y STATE	ZIP				
MONTHLY SALARY:\$POSITION/G	GRADE:	HOW LONG?YRS	SMONTH				
SUPERVISOR:FULL NAME	/	BUSINESS PHONE:	( )				

786 South Orange Avenue \* Sarasota FL 34236 \* Phone 941-366-3661 \* 941-923-4337 \* Fax 941-309-3091

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SPOUSE'S		ADDRES	0				
EMPLOYER:	COMPANY NA	ME ADDRES	S: STREET	CITY	STATE	ZIP	•
MONTHLY SALA	ARY:\$	POSITION/GRADE:			HOW LONG?YR	SMONTH	
SUPERVISOR:_			<u>/</u>		BUSINESS PHONE: (	)	
	FULL N	AME	POSITION				
MISCELLANEO	US INFORMATI	ON					
PETS:					NUMBER		
	DESCRIPTION		color				
		QUENT IN PAYMENT			THER FINANCIAL OBLIG	ATION?	
<b>OBLIGATION O</b>	F A RENTAL AG	ENDEANT IN AN UNLA REEMENT OR LEASE	?	,	ON) LAWSUIT OR DEFAU	LT (FAILED TO	PERFORM) ANY
HAVE YOU EVE YES, PLEASE E	ER BEEN CRIMII	NALLY CONVICTED A	ND FOUND GUIL	LTY OR PLE	EAD NO CONTEST IN A C	OURT OF LAW	?IF
OVERSEAS RE UNDERSTAND WITH THIS APP IF APPLICATIO DEPOSIT MADE	ALTY, INC. OR THAT THERE IS PLICATION. AN N IS APPROVEI WILL BE CON	TS AGENTS TO VERI A NONREFUNDABL Y MONEY THAT IS IN	IFY THE ABOVE E \$60.00/APPLIC CLUDED WITH T S DENIED, THE I	INFORMATION INFORM	BEST OF MY KNOWLEDG FION AND TO DO A CREI PER ADULT THAT IS DU CATION TO HOLD THIS H VILL BE RETRUNED WITH HOME.	DIT REPORT. I / E TO OVERSE/ IOUSE WILL NO	ALSO AS REALTY, INC. OT BE REFUNDED
SIGNATURE	<u> </u>			DATE			
SIGNATURE	<u> </u>			DATE			

Please provide a copy of "Proof of Income" for any individual who will be contributing to the Rental Payment. That 'Proof of Income" may be any <u>one</u> of the following:

- 1) Copies of 2 pay periods of Paychecks
- 2) W-2 Form from previous year
- 3) Tax Returns from previous year
- 4) Letter from Employer, on Company Letterhead stating pay rate, average hours worked per week and length of employment