

APARTMENT APPLICATION

5401 S. Dale Mabry Highway
Tampa, FL 33611
813.839.2138

RESIDENTIAL RENTAL APPLICATION (Each adult must complete a separate application)

Please Print Clearly

DATE:

1. Applicant Name _____ Phone _____

Email Address _____

Social Security Number _____ Date of Birth _____

Present Address: _____

How long have you lived there? _____

2. Present Landlord _____ Phone _____

Landlord Address: _____

Monthly Rent _____ Reason for Leaving _____

3. Previous Landlord _____ Phone _____

Landlord Address: _____

Monthly Rent _____ How long did you live there? _____

Reason for Leaving _____

4. Full names of all individuals (date of birth and ages of all children) who will be occupying premises:

5. Pets (specify) _____

6. Have you ever been evicted, sued for nonpayment of rent, or breached a lease (if so, explain)?

7. Have you ever been convicted of a felony? _____ Date: _____

8. Present Employer _____ Phone _____

Employer Address _____

Occupation: _____ Title: _____

Gross Monthly Salary _____ Length of Employment _____

9. Other Income, if any (specify source) _____

9. Automobiles: Your Driver License Number _____ Issuing State _____

(1) Make/Model _____ Year _____ Plate _____ State _____

10. In case of emergency notify _____ Relationship _____

Address: _____

Phone: _____ Email Address: _____

I certify that the above information is true and complete. I authorize the verification of this information by contacting any or all individuals and financial institutions listed above. 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 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. I understand that this is not a lease or an offer to rent. No binding obligation of any kind exists between the owner and myself, unless and until a lease is signed. This Application shall remain the property of the owner.

Signature of Applicant _____ Date _____

NO PERSON SHALL BE DENIED THE RIGHT TO RENT OUR PROPERTY BECAUSE OF THEIR RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN OR ANCESTRY.

For Office Use Only

Fees	Amount	Paid
Application	\$35.00	
Security Deposit	\$500.00 – 600.000	
Pet Deposit	\$300.00 (Non-Refundable)	
First Month's Rent	Pro-rated	

Move-In Date _____ NWP Account Number _____

TECO Account Number _____