

American Property Management (Agent For Owner)

MARRIED Rental Application (Authorization for Credit/Background Checks)

*SPECIFIC PET INFORMATION IS A FORFEITURE ISSUE – Each application must include all occupants and all pets
Qualifying To Rent By: CREDIT; CO-SIGNER/GUARANTOR; or TENANT CASH GUARANTEE

Rental Property: _____ Monthly Rent: \$ _____

Name: _____ SS#: _____ - _____ - _____ DL#: _____

Phone, Work ____/____-____, Home ____/____-____ Cell: ____/____-____ Email: _____@_____

***Have you ever had a/an (insert Yes or No): Alias ____; Charge-off ____; Collection ____; Delinquency ____; Bankruptcy ____; Failure To Pay Rent ____; Failure To Honor a Lease ____; Conviction for a felony or had an adjudication withheld or a deferral of a felony offense ____; Eviction filed against you, or current or former landlord ask you to leave ____?**

Spouse: _____ SS#: _____ - _____ - _____ DL#: _____

Phone, Work ____/____-____, Home ____/____-____ Cell: ____/____-____ Email: _____@_____

***Have you ever had a/an (insert Yes or No): Alias ____; Charge-off ____; Collection ____; Delinquency ____; Bankruptcy ____; Failure To Pay Rent ____; Failure To Honor a Lease ____; Conviction for a felony or had an adjudication withheld or a deferral of a felony offense ____; Eviction filed against you, or current or former landlord ask you to leave ____?**

*All Additional Occupants: NAME: _____ RELATIONSHIP: _____ 18 or older YES NO

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Pet: _____ Breed _____ Size _____ lbs. AGE: _____ COLOR: _____ Vet ID Copies Incl: YES NO

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Current Legal Notice Address: _____ Zip _____

Owner/Landlord/Agent _____ Contact phone number _____ Alternate number _____

Previous Address: _____ Zip _____

Owner/Landlord/Agent _____ Contact phone number _____ Alternate number _____

Your 6 month employment information: Full-Time , Self-Employed , Student , Retired , Other

Employer _____ Address _____

Position _____ Supervisor _____ Contact Phone _____

Spouse or Previous Employer or 2nd Job: Full-Time , Self-Employed , Student , Retired , Other

Employer _____ Address _____

Position _____ Supervisor _____ Contact Phone _____ - _____ - _____

In case of emergency notify _____ Phone _____ Where _____

Applicant(s) represents that all of the above information and statements on this application for rental are true and complete, and applicant(s) hereby authorizes verification of any and all information relating to residential history (rental or mortgage), employment history, criminal history records, court records, and credit references. This application must be signed before management can process it. ***Applicant(s) acknowledges that false or omitted information herein does constitute grounds for rejection of this application, termination of Right of Occupancy, and will result in forfeiture of fees and/or deposits to Aamerican Property Management and may constitute a criminal offence under the Laws of the State of Florida.**

NO APPLICATION FEE DUE – Property Manager pays for credit and background due to GUARANTEE.

Applicant(s) understands that he/she is being charged a NON-REFUNDABLE application fee of \$40.00 for a married couple; (\$ 40.00 each additional person 18 years of age or older) – This application is part of the rental application process and does in no way obligate the OWNER or the AGENT FOR THE OWNER to execute a lease/rental agreement or deliver possession of the proposed premises. Associations may require a separate application fee. No oral agreements have been made. We are pleased to comply with Federal Fair Housing Laws, State Real Estate Laws, ADA Regulations, FS 83, etc. and incorporate them in our method of operation/policies.

***I agree that the Owner/Agent for Owner may terminate any agreement entered into in reliance on any misstatement(s) made above, and, further agree that upon such misstatement Agent for Owner may retain all fees and deposits.**

Applicant _____ Spouse _____ DATE: ____/____/2010

Where room does not permit, please ad information to reverse side, sign and date – Thank you!

Cell: 321/693-8026 - Call Message Center/Home Office Fax: 321/724-5380

Email: snvillaci@earthlink.net 144 Ocean Terrace, Indian Lantic, FL 32903