

+ \$20.00 per applicant and copy of drivers license

SUNBELT MANAGEMENT SERVICES

4678 TAMIAMI TRAIL # 102, PORT CHARLOTTE, FL 33980

941-764-7777 800-283-0431 FAX 941-764-7756

cindy@sunbeltmgtservices.com

TENANT APPLICATION

PROPERTY ADDRESS: ----- DATE.: -----

RENTAL TERM: 12 months ANTICIPATED MOVE IN DATE: _____

REFERRED BY: _____ RENTAL AGENT **CINDY LOEWE**



APPLICANT #1 FULL NAME: _____

EMAIL ADDRESS: _____

DATE OF BIRTH: _____ SOCIAL SECURITY NUMBER: _____

PLACE OF EMPLOYMENT: _____ PHONE: _____

EMPLOYMENT DATES: _____ POSITION/TYPE OF WORK _____

SUPERVISOR NAME: _____ WEEKLY SALARY _____

APPLICANT #2 FULL NAME: PHONE: _____

EMAILADDRESS: _____

DATE OF BIRTH: _____ SOCIAL SECURITY NUMBER: _____

SPOUSES EMPLOYMENT: _____ PHONE: _____

EMPLOYMENT DATES: _____ POSITION/TYPE OF WORK _____

SUPERVISOR NAME: _____ WEEKLY SALARY _____

PRESENT ADDRESS: -----

TIME OF OCCUPANCY: _____ RENTAL RATE: _____

CURRENT LANDLORD: _____ PHONE: _____

LANDLORDADDRESS: _____

PREVIOUSADDRESS: _____

TIME OF OCCUPANCY: _____ RENTAL RATE: _____

PREVIOUS LANDLORD: _____ PHONE: _____

OTHER INCOME: _____

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FULL NAMES AND AGES OF PERSONS TO OCCUPY UNIT

NOTE - A COPY OF THE DRIVERS LICENSE FOR ANY ADULT LISTED ABOVE MUST BE ATTACHED TO THIS APPLICATION. ALL ADULTS MUST SIGN THE LEASE.

DO YOY HAVE A PET? YES _____ NO _____ HOW MANY: _____ WHAT KIND OF PET(S)? _____

AGE : _____ WEIGHT: _____ COLOR: _____ NAME: _____

IS THE PET NEUTERED?: _____ IS THE PET DECLAIVED? : _____

ADDITIONAL PET DEPOSIT REQUIRED.

PERSONAL REFERENCES – LIST TWO

NAME: _____ PHONE: _____

OCCUPATION: _____ HOW LONG KNOWN _____

NAME: _____ PHONE: _____

OCCUPATION: _____ HOW LONG KNOWN: _____

NUMBER OF AUTOMOBILES: _____ OTHER VEHICLES: _____

MAKE/YEAR/COLOR _____ TAG NUMBER: _____

MAKE/YEAR/COLOR _____ TAG NUMBER: _____

.....
IN CASE OF EMERGENCY: ALL CONTACT INFORMATION AVAILABLE SO WE CAN GET IN TOUCH WITH YOU IF NECESSARY.

ALL EMAIL OR PHONE NUMBERS WHERE YOU CAN BE REACHED: _____

NAMES OF ANYONE WE CAN CONTACT IF UNABLE TO REACH YOU:

NAME: _____ RELATIONSHIP: _____ PHONE: _____

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WHY ARE YOU LEAVING YOUR PRESENT ADDRESS? _____

HAVE YOU EVER BEEN EVICTED? _____

HAVE YOU EVER BROKEN A LEASE/RENTAL AGREEMENT _____

IF SO WHY? _____

HAVE YOU EVER BEEN SUED FOR NONPAYMENT OR DAMAGES TO RENTAL PROPERTY?

HAVE YOU EVER BEEN CONVICTED OF A FELONY? _____

AUTHORIZATION: I HEREBY AUTHORIZE SUNBELT MANAGEMENT SERVICES TO VERIFY ALL INFORMATION CONTAINED ON THE APPLICATION AND CONDUCT A FULL BACKGROUND CHECK INCLUDING BUT NOT LIMITED TO CREDIT, BANK ACCOUNT, EMPLOYMENT, EVICTION, CRIMINAL BACKGROUND CHECKS AND AUTHORIZE PROPERTY MANAGER TO CONTACT ANY PERSONS OR COMPANIES LISTED ON THE APPLICATION.

CORRECT INFORMATION: I AFFIRM THAT ALL THE INFORMATION ON THIS APPLICATION IS TRUE, ACCURATE, COMPLETE AND CORRECT AND AGREE THAT IF THIS IS NOT SO, MY APPLICATION MAY BE DENIED AND/OR MY LEASE WILL BE HELD IN DEFAULT AND I MAYBE SUBJECT TO ~VICTION.

APPLICATION FEE: I HEREBY AGREE TO PAY A NON-REFUNDABLE APPLICATION FEE OF \$20.00.


GOOD FAITH DEPOSIT: APPLICANT(S) HAS PAID TO LANDLORD AND/OR MANAGEMENT COMPANY HERewith THE SUM OF \$500.00 AS A GOOD FAITH DEPOSIT. IF APPLICANT IS APPROVED BY LANDLORD AND/OR MANAGEMENT AND THE LEASE IS ENTERED INTO AND POSSESSION OF THE UNIT IS TAKEN THE "DEPOSIT" SHALL BE APPLIED TOWARD THE SECURITY/DAMAGE DEPOSIT. IF APPLICANT IS APPROVED, BUT FAILS TO ENTER INTO THE LEASE WITHIN 3 DAYS OF VERBAL AND/OR WRITTEN APPROVAL AND/OR TAKE POSSESSION AFTER LEASE SIGNING, THE FULL "DEPOSIT" SHALL BE FORFEITED TO THE LANDLORD OR MAGEMENT IN ADDITION TO ANY PENALTIES AS PROVIDED IN THE LEASE IF THE LEASE HAS BEEN SIGNED BY THE APPLICANT. THE "DEPOSIT" SHALL BE REFUNDED ONLY IF APPLICANT IS NOT APPROVED. 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.

I/WE AGREE WITH THE TERMS SET FORTH ABOVE:

APPLICANT SIGNATURE: _____ DATE: _____

APPLICANT SIGNATURE: _____ DATE: _____

- APPLICATION FEE (NON-REFUNDABLE)
- GOOD FAITH DEPOSIT (\$500.00)
- COPY OF DRIVERS LICENSE FOR ALL ADULTS
- PROOF OF EMPLOYMENT/AVAGES

 ALL SIGNATURES WHERE INDICATED

NOTE: WE DO BUSINESS IN ACCORDANCE WITH THE FEDERAL FAIR HOUSING LAW. IT IS ILLEGAL TO DISCRIMINATE AGAINST ANY PERSON BECAUSE OF RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, FAMILIAL STATUS OR HANDICAP
