

RENTAL / LEASE APPLICATION

Management: Christopher Mayer

PO BOX 24846

JACKSONVILLE, FL 32241-4846

Ph# 904-687-6105 Email: cmayer6819@msn.com Fax# 904-212-0256

Applicants-Name: First _____ Middle _____ Last _____ Date of Birth _____
Social Security Number _____ Drivers License # _____ Exp. Date: _____
EMAIL ADDRESS: _____
Number of Children, Names & Ages: _____

APPLICANTS CURRENT ADDRESS RENT AMOUNT PAID? _____
Present Address: _____ City: _____ State: _____ Zip _____
Home Phone _____ **CELLULAR PH#** _____
Dates lived at present address? From: _____ To: _____
Landlord or Agents Name _____ Phone _____

APPLICANTS PREVIOUS ADDRESS RENT AMOUNT PAID? _____
Previous: Address: _____ City: _____ State _____ Zip _____
Dates lived at previous address? From: _____ To: _____
Landlord or Agents Name _____ Phone _____

CO-applicants Name: First _____ Middle _____ Last _____ Date of Birth _____
Social Security Number _____ Drivers License # _____ Exp. Date: _____
EMAIL ADDRESS: _____
Number of Children, Names & Ages: _____

CO-APPLICANTS CURRENT ADDRESS RENT AMOUNT PAID? _____
Present Address: _____ City: _____ State: _____ Zip _____
Home Phone _____ **CELLULAR PH#** _____
Dates lived at present address? From: _____ To: _____
Landlord or Agents Name _____ Phone _____

CO-APPLICANTS PREVIOUS ADDRESS RENT AMOUNT PAID? _____
Previous: Address: _____ City: _____ State _____ Zip _____
Dates lived at previous address? From: _____ To: _____
Landlord or Agents Name _____ Phone _____

VEHICLE INFORMATION

Car #1 Make _____ Year _____ Model _____
Color _____ License Plate number _____

Car #2 Make _____ Year _____ Model _____
Color _____ License Plate number _____

Car #3 Make _____ Year _____ Model _____
Color _____ License Plate number _____

Do any of your vehicles leak oil or antifreeze? _____

RENTAL / LEASE APPLICATION

Management: Christopher Mayer

PO BOX 24846

JACKSONVILLE, FL 32241-4846

Ph# 904-687-6105 Email: cmayer6819@msn.com Fax# 904-212-0256

OCCUPATION

Applicants-Current Employer:

Company Name: _____ Address _____ City _____ Zip _____

Supervisors Name: _____ Phone _____

Position Held _____ Work Shift Start _____ End _____

Date hired by this employer? _____ Gross Monthly Income _____

NOTE: IF YOUR LENGTH OF EMPLOYMENT IS LESS THAN 1 YEAR WITH THE CURRENT EMPLOYER, PLEASE LIST THIS IDENTICAL INFORMATION ABOUT YOUR PREVIOUS EMPLOYER ON THE BACK OF THIS PAGE!

LIST ANY ADDITIONAL SOURCES AND AMOUNTS OF INCOME HERE _____

Do you own or plan to own any Pets? _____ Do you smoke? _____

CO-applicants-Current Employer:

Company Name: _____ Address _____ City _____ Zip _____

Supervisors Name: _____ Phone _____

Position Held _____ Work Shift Start _____ End _____

Date hired by this employer? _____ Gross Monthly Income _____

NOTE: IF YOUR LENGTH OF EMPLOYMENT IS LESS THAN 1 YEAR WITH THE CURRENT EMPLOYER, PLEASE LIST THIS IDENTICAL INFORMATION ABOUT YOUR PREVIOUS EMPLOYER ON THE BACK OF THIS PAGE!

LIST ANY ADDITIONAL SOURCES AND AMOUNTS OF INCOME HERE _____

Do you own or plan to own any Pets? _____ Do you smoke? _____

Applicants Closest Personal Reference:

Name _____ Address _____

Phone _____ Length of Acquaintance _____ Relationship _____

Applicants Closest Immediate Family:

Name _____ Address _____

Phone _____ Length of Acquaintance _____ Relationship _____

CO-Applicants Closest Personal Reference:

Name _____ Address _____

Phone _____ Length of Acquaintance _____ Relationship _____

CO-Applicants Closest Immediate Family:

Name _____ Address _____

Phone _____ Length of Acquaintance _____ Relationship _____

RENTAL / LEASE APPLICATION

Management: Christopher Mayer

PO BOX 24846

JACKSONVILLE, FL 32241-4846

Ph# 904-687-6105 Email: cmayer6819@msn.com Fax# 904-212-0256

Do you have a Bank or Credit Union Checking account? **Applicant** _____ **CO-applicant** _____
Name of Bank or C.U. you do business with? **Applicant** _____ **CO-applicant** _____
Applicant: Bank/C.U. Account# _____ Phone _____
CO-applicant: Bank/C.U. Account# _____ Phone _____

Applicant: Please list 2 Credit References that you currently have Credit with:

1st Credit Reference Name _____ Purpose/Type of Credit _____ Date Credit Obtained _____
2nd Credit Reference Name _____ Purpose/Type of Credit _____ Date Credit Obtained _____

CO-applicant: Please list 2 Credit References that you currently have Credit with:

1st Credit Reference Name _____ Purpose/Type of Credit _____ Date Credit Obtained _____
2nd Credit Reference Name _____ Purpose/Type of Credit _____ Date Credit Obtained _____

How do you plan on paying your rent? Cash _____ Check _____ Money Order _____ Other _____

Have you ever been convicted of a Felony? **Applicant** _____ **Co-applicant** _____

Do you have any outstanding tickets or charges pending against you in the US? **Applicant** _____ **Co-applicant** _____

Have you ever been over 2 weeks behind on rent? **Applicant** _____ **Co-applicant** _____

Have you ever filed a petition for bankruptcy? **Applicant** _____ **Co-applicant** _____

Have you ever been evicted from any tenancy? **Applicant** _____ **Co-applicant** _____

Have you ever willfully and intentionally refused to pay any rent when due? **Applicant** _____ **Co-applicant** _____

How did you find out about this vacancy? _____

I DECLARE THAT THE FOREGOING INFORMATION IS TRUE AND CORRECT, AND AUTHORIZE its VERIFICATION BY OBTAINING A CONSUMER CREDIT REPORT, PRIOR RENTAL HISTORY VERIFICATION, CRIMINAL HISTORY BACKGROUND CHECK, EMPLOYMENT STATUS and INCOME VERIFICATION. I agree that the Landlord may terminate this application because of any misstatements made above.

A \$40.00 non-refundable screening fee will be collected when this application is submitted. Please note that if the Applicant and Co-applicant are not a married party, the screening fee will be double to \$80.00 for 2 separate screenings.

THANK YOU FOR APPLYING!

APPLICANTS SIGNATURE _____ DATED: _____

CO-APPLICANT SIGNATURE _____ DATED: _____