



PROPERTY MANAGEMENT
OF POLK, LLC

403 1st Street South
Winter Haven, FL 33880

(863)259-4600 | admin@propertymanagementofpolk.com

\$50 Nonrefundable application fee per person. **Payable to:** Property Management of Polk, LLC
(Cash, Money Order or Cashier's Check only. No personal checks accepted.)

Rental Application

Today's Date:	Desired Move in Date:	Lease Term:
Property Address:		
Name of Agent who showed you the property:		Agent's Company:

Applicant Information		
Applicant #1		
Name:	Social Security #:	
Date of Birth:	Driver's License #:	
Best Phone #:	Check One: <input type="checkbox"/> Work <input type="checkbox"/> Home <input type="checkbox"/> Cell	
Additional Phone #:	Check One: <input type="checkbox"/> Work <input type="checkbox"/> Home <input type="checkbox"/> Cell	
Email Address:		
Current Address:		
Check One: <input type="checkbox"/> Rent <input type="checkbox"/> Own	Monthly Payment:	How long at this address:
Reason for leaving:		
Manager/ Landlord's Name:		Phone #:
Previous Address:		
Check One: <input type="checkbox"/> Rent <input type="checkbox"/> Own	Monthly Payment:	How long at this address:
Reason for leaving:		
Manager/ Landlord's Name:		Phone #:
Applicant #2		
Name:	Social Security #:	
Date of Birth:	Driver's License #:	
Best Phone #:	Check One: <input type="checkbox"/> Work <input type="checkbox"/> Home <input type="checkbox"/> Cell	
Additional Phone #:	Check One: <input type="checkbox"/> Work <input type="checkbox"/> Home <input type="checkbox"/> Cell	
Email Address:		
Current Address:		
Check One: <input type="checkbox"/> Rent <input type="checkbox"/> Own	Monthly Payment:	How long at this address:
Reason for leaving:		
Manager/ Landlord's Name:		Phone #:
Previous Address:		
Check One: <input type="checkbox"/> Rent <input type="checkbox"/> Own	Monthly Payment:	How long at this address:
Reason for leaving:		
Manager/ Landlord's Name:		Phone #:

Employment Information		
Applicant #1		
Occupation/Position:	Employer:	
Employer Address:		
Current Supervisor or HR Dept Name:		
Phone #:		
Check One: <input type="checkbox"/> Hourly <input type="checkbox"/> Salary	Annual Income:	
How long at this job?	Other Income:	
Amount of Alimony or Child Support Paid:	Amount Received:	
Applicant #2		
Occupation/Position:	Employer:	
Employer Address:		
Current Supervisor or HR Dept Name:		
Phone #:		
Check One: <input type="checkbox"/> Hourly <input type="checkbox"/> Salary	Annual Income:	
How long at this job?	Other Income:	
Amount of Alimony or Child Support Paid:	Amount Received:	
Previous Address:		
Check One: <input type="checkbox"/> Rent <input type="checkbox"/> Own	Monthly Payment:	How long at this address:
If more than one applicant, what is your combined income:		
Background Information		
Have you or anyone in this household been convicted of a crime? Check One: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you or anyone in this household ever been evicted, served with a three day notice or been late with the rent? Check One: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you or anyone in your household considered a sexual offender? Check One: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever filed for bankruptcy?	Check One: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever been foreclosed on?	Check One: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever broken a lease?	Check One: <input type="checkbox"/> Yes <input type="checkbox"/> No	
If you or anyone in this household circled YES to any of these questions, please explain:		
Do you smoke? Check One: <input type="checkbox"/> Yes <input type="checkbox"/> No		
References		
Name:	Phone #:	
Address:	Relationship:	
Name:	Phone #:	
Address:	Relationship:	
Please list names and ages of any additional occupants that will be residing at the property:		
Nearest Relative not living with you:		Phone Number:
Do you have any pets? Check One: <input type="checkbox"/> Yes <input type="checkbox"/> No How Many?		
Type:	Breed:	Weight:
Type:	Breed:	Weight:
Please see item #4 on our Resident Selection Criteria, which is a part of this application.		

Please initial and sign below.

_____ I hereby apply for this rental property. I understand that this application is subject to approval. I understand that the application fee is non-refundable. If approved, this application along with the security deposit will remove this property from the rental market.

_____ I hereby understand that by signing this application, a binding offer to rent/lease said premises is created and in the event that the landlord accepts my application and I fail to accept the property or enter into a lease for this property, my deposit will be forfeited and used as liquidated damages.

If accepted, I agree to sign a lease. I hereby authorize Property Management of Polk, LLC to verify the information provided in this application. I understand that they will run a credit, criminal background, evictions and a sexual predator check, that they will verify my employment as well as my personal references. I request all credit reporting services, banks, courts, employers, landlords and personal references to disclose any pertinent information about me. I certify all answers are true.

Date: _____ **Applicant 1 Signature:** _____

Date: _____ **Applicant 2 Signature:** _____



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Employment Verification

NOTE: APPLICANTS DO NOT COMPLETE THIS FORM. This form is to be filled out by your supervisor, manager or HR Director. Just print your name on the first line and sign where it asks for signature of applicant.

I, _____, give Property Management of Polk, LLC permission to obtain information about my current and previous employment history.

To Supervisor, Manager or HR Dept: Please complete this form and scan it to Property Management of Polk, LLC at admin@propertymanagementofpolk.com.

Please answer the following questions the best that you can.

What is the applicant's job title? _____

What is the name of the company? _____

What dates is/was the applicant employed? Beginning _____ / _____

Month Year
Until _____ / _____
Month Year

What is the applicant's salary? _____ per month _____ per year

Is this a full-time permanent position? Check One: Yes No Explain, if necessary:

Name of person completing this form: _____

Position of person completing this form: _____

Phone number to reach person completing this form: _____

_____ Signature of Applicant

_____ Signature of Person who completed this form

_____ Date completed



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Rental Reference

APPLICANTS DO NOT COMPLETE THIS FORM.

YOUR LANDLORD OR YOUR LANDLORD'S AGENT MUST COMPLETE THIS FORM. ALL THE APPLICANT NEEDS TO DO IS FILL IN THEIR NAME, THE ADDRESS OF THE RENTAL THEY RENTED FROM THIS LANDLORD AND SIGN WHERE IT ASKS FOR APPLICANT'S SIGNATURE.

I, _____, give Property Management of Polk, LLC permission to obtain information about my previous rental history at:

Please fill in address of property

Signature of applicant Date

Signature of applicant Date

Landlord or Agent: Please complete this form and return to Property Management of Polk, LLC by email.

1. Please specify dates of rental period from ___/___/___ through ___/___/___.
2. Has this tenant ever been late with the rent? _____
a. If yes, how many times? _____.
3. Have you ever had a check that was returned from this tenant? _____
a. If yes, how many times? _____.
4. Has this tenant ever violated their lease? _____
a. If yes, please explain _____
_____.
5. Have you ever posted a 3 day notice to this tenant? _____
a. If yes, how may times? _____.
6. Have you ever started eviction proceedings against this tenant? _____.
7. How has the tenant maintained the property? _____.
8. Would you rent to this tenant again? _____.

This form was completed by:

Name Company

Phone #

Signature Date