



Rental application
Authorization to Release Information
PRINT NEATLY

Potential rental address: _____

What is the monthly rent amount: _____

Lease terms (ex. 6 months, 1 year): _____

Please answer the following information for each potential resident
of the age 18 or older at the time of signing the lease:

Full name	cell phone	email	signature*
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

* By signing this form, I authorize a release of information in conjunction of a background check with the intent to lease.

Please mail this completed application and a money order, made out to

Neighorly Mgt to PO Box 6910 Brandon Florida 33508.

The cost is \$75 for each applicant/resident 18 or older.

Potential tenants are not authorized to move into the residence until the HOA approves.