

Cabana Royal Arms Apartments Pet Application

Please use separate sheet for each pet. Must provide all information below and signature is required for completion.

Name of Applicant/Pet Owner: _____

Home/Cell Phone Number: _____

Work Phone Number: _____

Pet Information:

Type of Pet: CAT DOG Is This A Mixed Breed? YES NO

Breed Description: _____

Coloring and/or specific markings: _____

Approximate Age: _____ Sex: _____ Weight: _____ Spayed/Neutered? YES NO

Resident's Current Address ***required***

Address: _____

Name of landlord or resident manager: _____ Phone Number: _____

Resident's Past Address (if animal was at this address) ***required***

Address: _____

Name of landlord or resident manager: _____ Phone Number: _____

Pet Reference ***required***

Name of Veterinarian: _____ Phone Number: _____

REQUIRED

**Please attach a recent photo of your pet and/or
email a photo to leasing@cabanalex.com**

***Photo must be of the FACE/HEAD and
must be CLEAR**

By signing below, I confirm that the information provided is TRUE, and hereby authorize verification of any and all information listed. I further understand, and agree to the provisions and rules determined by the PET POLICIES portion of my application packet. I further understand and agree, that management reserves the right to approve or deny any pet at their discretion.

Signature of Pet Owner

Date

CRA Agent's Signature

Date

OFFICE USE ONLY

Approved/Denied: _____ Approved/Denied Date: _____

Approved/Denied By: _____