

# Leasing Application

- Three Angels Apartments** 7791 Lilah Lane, Pensacola, FL 32526 \* Office: 850-456-6044 \* Fax 850-456-6045
- Other Property** \_\_\_\_\_

**Date of Application:** \_\_\_\_\_ **Desired Occupancy Date:** \_\_\_\_\_ **Desired Unit (# of Bedrooms):** \_\_\_\_\_

### PERSONAL INFORMATION – PRIMARY LEASE HOLDER APPLICANT

|                      |  |                           |  |
|----------------------|--|---------------------------|--|
| <b>Full Name</b>     |  | <b>DOB:</b>               |  |
| <b>Mobile Phone:</b> |  | <b>Social Security #:</b> |  |
| <b>Work Phone:</b>   |  | <b>Email Address:</b>     |  |

**ADDITIONAL OCCUPANTS** (List every occupant's name and their relationship below, including children.) **Note:**  
Applications must be completed by all adults and will be assessed a separate application fee

| Full Name | Relationship | Date of Birth | Social Security # |
|-----------|--------------|---------------|-------------------|
|           |              |               |                   |
|           |              |               |                   |
|           |              |               |                   |
|           |              |               |                   |

### EMPLOYMENT INFORMATION

|   |                                   |                 |  |
|---|-----------------------------------|-----------------|--|
| <b>Primary Applicant<br/>Current Employer</b> |                                   | Job Title       |  |
| Length of Employment                          | ----/----/----- - ----/----/----- | Supervisor Name |  |
| Address/Phone Number                          |                                   |                 |  |
| <b>Previous Employer</b>                      |                                   | Job Title       |  |
| Length of Employment                          | ----/----/----- - ----/----/----- | Supervisor Name |  |
| Address/Phone Number                          |                                   |                 |  |

### RENTAL HISTORY

|                         |                                   |                 |  |
|-------------------------|-----------------------------------|-----------------|--|
| <b>Current Address</b>  |                                   | Name of Complex |  |
| Length of Lease         | ----/----/----- - ----/----/----- | Phone Number:   |  |
| <b>Previous Address</b> |                                   | Name of Complex |  |
| Length of Lease         | ----/----/----- - ----/----/----- | Phone Number:   |  |

# Leasing Application

---

## Authorization Page

1. \_\_\_\_\_  
(Initials)

### **Application Fee**

The Undersigned Applicant has submitted the Application Fee in the sum of \$50 per application, which is Non Refundable payment for a credit check and processing charges associated with this application. Sum is non rental payment or deposit amount. In the even this application is approved/declined by Owner or cancelled by the applicant this sum is nonrefundable. This application must be signed before Owner can process it. Applicant understands that the Owner may obtain a credit report in the future without future authorization of Applicant in the event of default of the lease agreement or other rental agreements between Owner and Applicant.

2. \_\_\_\_\_  
(Initials)

### **Holding Deposit/Security Deposit**

If my application is accepted, half of the security deposit must be paid within 2 days of approval which will be the holding deposit. Once the Applicant moves in, the holding deposit will be transferred and used as the Security Deposit. Applicant also understand that a higher security deposit may be required due to credit, rental history, income, etc. (NO UNIT IS HELD UNLESS HALF OF THE SECURITY DEPOSIT IS PAID)

3. \_\_\_\_\_  
(Initials)

### **Cancellation/Forfeiture of Deposit**

I understand once the security deposit/holding deposit is received, if I cancel the application or refuse to occupy the premises, or if any changes occur to this application, including, but not limited to income and occupancy, then I understand that the security deposit will be retained by Owner as liquidated damages after 48 hours once received. Retention of deposit shall in no way be interpreted as preventing the landlord from obtaining damages for the breach of lease agreement of any other rental agreement between Owner and Applicant.

4. \_\_\_\_\_  
(Initials)

### **Authorization**

Applicant authorizes Owner to contact current and previous landlords and employers to release requested information to Owner. Applicant also authorizes Owner to obtain a consumer credit report and run a background check on the Applicant and/or occupant(s). Applicants understand that application(s) may be denied because of credit, landlord history, insufficient\* income or criminal background history. Co-signers are not allowed to supplement household income. Co-signers are no longer allowed. (\*income should be 3 times the rental rate). Applications will be denied with previous felony charges within the last 10 years.

5. \_\_\_\_\_  
(Initials)

### **Occupants on Application**

Applicant understands that all adult applicants must complete their own application and all adults must be approved. Failure to list ALL occupants will result in a violation of lease agreement and could result in an eviction. Applicant must list all adult applicants and children who will be occupying the unit. Applicant has confirmed that all occupants are listed on application.

**Date:** \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

# Leasing Application

TOTAL NET MONTHLY INCOME FOR HOUSEHOLD: \_\_\_\_\_

## OTHER INFORMATION

Have you rented from us before or rented or from another property we are affiliated with? \_\_\_\_\_

If so, where and when? \_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_

If so, what type? \_\_\_\_\_

Have you ever been evicted? \_\_\_\_\_

On what grounds? \_\_\_\_\_

Do you have a Pet? \_\_\_\_\_ Type: \_\_\_\_\_ Breed(s) : \_\_\_\_\_ How many? \_\_\_\_\_

## EMERGENCY CONTACT

| Name | Address | Phone |
|------|---------|-------|
|      |         |       |

**NOTE: FAILURE TO COMPLETELY FILL OUT THIS APPLICATION, AND/OR MAKING FALSE STATEMENTS ON THIS APPLICATION IS GROUNDS FOR IMMEDIATE REJECTION.**

The \$50 fee (per applicant) to process this application is **NON REFUNDABLE**.

Application will automatically be rejected on ANY APPLICANT who has had a felony charge within the past ten years.

Applicant has confirmed that all occupants that will be residing in unit is listed on the application. If approved, failure to list all occupants is a violation of your lease agreement and could be subject to an eviction.

Date: \_\_\_\_\_

Primary Applicant Signature: \_\_\_\_\_

### To complete application process you must supply the following:

- Completed Application and Authorization page
- Proof of employment (past 2 paystubs or letter from employer. If military - copy of LES)
- Copy of driver's licenses for all lease holders
- Landlord Verification (complete top portion and sign and date the bottom. We will send the Landlord Verification to your current/previous landlord)
- Application fee(s) - \$50/Adult. Application waived for Military

# Leasing Application

---

## Rental Verification

Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name of Complex/Agency: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Check One (Current Landlord \_\_\_\_\_/ Previous Landlord \_\_\_\_\_)

---

### TO BE COMPLETED BY LANDLORD/AGENCY

1. How long did (has) the resident reside(d) at this address? \_\_\_\_\_ Lease Dates? \_\_\_\_\_
2. How many bedrooms and baths? \_\_\_\_\_
3. Why did the resident move out? \_\_\_\_\_
4. Have/Did they give proper notice to vacate? \_\_\_\_\_
5. How much is the resident currently past due? \_\_\_\_\_ Describe \_\_\_\_\_

### **RENTAL PAYMENT**

6. What was (is) monthly rental amount? \_\_\_\_\_ Security Deposit? \_\_\_\_\_
7. Has the tenant ever been late in payment of the monthly rent? \_\_\_\_\_ Any NSF? \_\_\_\_\_
8. If yes, how many times late? \_\_\_\_\_ how late? (5<sup>th</sup>, 15<sup>th</sup>, etc)? \_\_\_\_\_
9. Did (have) you ever begin (begun) eviction proceedings for nonpayment? \_\_\_\_\_  
If yes, please describe \_\_\_\_\_

### **APARTMENT UPKEEP**

10. Did (does) tenant maintain desirable living conditions: i.e., clean, well kept? \_\_\_\_\_  
If no, describe \_\_\_\_\_
  11. Did (will) you keep any portion of the security deposit? \_\_\_\_\_
  12. Did (does) resident: \_\_\_\_\_ get along with other neighbors? -Or- \_\_\_\_\_ interfere with the rights of other tenants?
  13. Did (does) resident ever permit persons other than those on the lease to live in the apartment? \_\_\_\_\_
  14. Has the resident ever given you false information? \_\_\_\_\_  
If yes, describe \_\_\_\_\_
  15. Did the resident, family members or guests ever damage or vandalize surrounding common/public areas? \_\_\_\_\_ Create and physical hazards to the property or residents? \_\_\_\_\_
  16. Would you re-admit this resident to your property? \_\_\_\_\_
  17. Additional comments: \_\_\_\_\_
- 

Date Completed: \_\_\_\_\_

Name of Person Completed: \_\_\_\_\_

Name of Property/Agency: \_\_\_\_\_

---