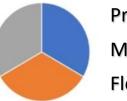
## RESIDENCY APPLICATION Sales and Leases



Precision Management of Florida Inc.

#### **Application Instructions**

Applicant must complete the application form in full. Incomplete applications will not be processed.

Applicant must submit the required processing fee. <u>Fee is one hundred fifty dollars (\$150.00)</u> <u>per applicant unless they are a married couple</u>, who are a total of one hundred fifty dollars (\$150.00). Application fees must be paid in the form of Zelle, Cash or Bank Check payable to Precision Management of Florida. No personal or business checks will be accepted.

#### A copy of the executed lease or sale contract must be attached.

All Applicants must submit legible copies of a **government issued picture ID** (i.e. driver's license or passport)

Applications will be processed by our offices and then forwarded to the Board of Directors or Association screening committee for review. Typical processing time for an application is 3-14 days.

# SHOULD A POTENTIAL OCCUPANT MOVE IN WITHOUT PRIOR APPROVAL, THE ASSOCIATION WILL IMPOSE FINES ACCORDINGLY.

Please note that most associations will not approve rental applications if the unit owner is delinquent with their Association fees or if they are in violation of the association's by-laws.

For Sales. Once all the information is received, questionnaires and estoppels can be requested. Please let us know closing dates so we can issue in a time effective manner.

#### Please see Fees below:

- a. **Estoppel fees.** (set by State of Florida). Ready in 5-10 business days for \$299.00
  - 1-3 business days rush fee for additional \$119.00
- b. Questionnaire fees. (set by State of Florida). Ready in 5-10 business days for \$299.00

1-3 business days rush fee for additional \$119.00

## Fees may be paid by check or by Zelle to <u>Accounting@pmoflorida.com</u>

Mail to: Precision Management of Florida Inc c/o David Lieberman 201 Jefferson Ave 3B Miami Beach, Fl 33139

## **RESIDENCY APPLICATION**

### Sales and Leases

Applicant

Name	Birth Date							
PHONE WHERE YOU CAN I	BE REACHED							
Email Address								
Social Security Number	Driver's License Number							
Full-time duty in active	military serv	vice of the l	Jnited Sta	ites? Yes	No			
Present Home Address					Apt. No			
City	State	Zip Code		Phone				
Lease Expires			Rent	\$	How Long?			
Landlord				F	hone			
Landlord's Address			City		State			
Reason(s) for leaving								
Previous Address			_City		State			
Landlord	Phone		Rent \$		How Long?			
Reason(s) for leaving								
Employed By								
Address								
Phone								
Previously employed by								
Address								
Phone	Position Supervisor							
Any litigation such as evice	tions, suits, o	r judgments	bankruptci	ies?				
VEHICLES								
1 <sup>st</sup> Auto – Make	Year	Tag. No.			State			
2 <sup>nd</sup> Auto – Make	Year	Tag. No	·		State			
Personal References								
Name	Phone Number			# of Year	Known			

## **RESIDENCY APPLICATION**

### Sales and Leases

**Co-Applicant** 

Name	Birth Date							
PHONE WHERE YOU CAN	BE REACHED _							
Email Address								
	Driver's License Number							
Full-time duty in active	military serv	vice of the l	Jnited Sta	tes? Yes	No			
Present Home Address					Apt. No.			
City								
Lease Expires								
Landlord								
Landlord's Address								
Reason(s) for leaving								
Previous Address					State			
Landlord								
Reason(s) for leaving								
Employed By					Years			
Address			City	У	State			
Phone								
Previously employed by								
Address			Citv	У	State			
Phone			Supervisor					
Any litigation such as evic	tions, suits, or	r judgments	bankruptci	es?				
VEHICLES								
1 <sup>st</sup> Auto – Make	Year	Tag. No.			State			
2 <sup>nd</sup> Auto – Make								
Personal References								
Name	Phone N		# of Years Known					

## **RESIDENCY APPLICATION**

Sales and Leases

The following <u>OTHER</u> persons	will occupy the unit:				
Name:	Relationship:	ip:Age:			
Name:	Relationship:	Age:	Age:		
Name:	Relationship:	Age:			
The following pet(s) will be in	the apartment:				
Breed: Weight:		Age:			
Breed: Weight:		Age:			
Have you ever been or conviction with details of conv		If yes, please provide city	and state of		
application or to deliver occupancy of the REFUNDABLE. I certify that I have read th application shall be incorporated in and b the Lease at the option of the Owner, Age submitted or it will not be processed. I (w	proposed premises. I understand that t e above Application; that the informatio ecome part of the Lease of the premises ent or Association. I understand that clea re) hereby authorize PMO Florida, Inc to Florida, Inc to obtain my credit report, e	no obligation of the Owner, Agent or Asso he application fee of one hundred dollars n contained therein is true and correct. I u s sought and if incorrect or untrue shall be ar and sufficient funds are required at the verify all information provided above. I (w mployment verification, criminal check an	(\$100.00) per person is NOT inderstand that this grounds for cancellation of time this application is ve) certify that all information		
Signature of Applicant:		Date:			
Signature of Co- Applicant:		Date:			
Apartment					
ADDRESS:		APT #:			
DESIRED MOVE IN DATE:					
REALTOR INFO:					
EMERGENCY CONTACTS 1.					
2.					