



Palm Properties
 of Central Florida, Inc.
 Licensed Real Estate Broker
 1526 E. Concord Street, Orlando Florida 32803
 (407) 898 2007 (407) 896 2494 Fax
LEASE APPLICATION

Date: _____

Property Address: _____
 Start Date: _____ Length of Lease _____ Rent: \$ _____
 Security Deposit: \$ _____ Pet Fee: \$ _____ Reservation Fee: \$ _____
 Application Fee: \$ _____ Manager: _____ Leasing Agent: _____

Tenant's Personal & Credit Information (In the event of co-tenants, other than spouses, use separate sheet for each tenant)				
Name			Date of Birth	
Driver's License #		Social Security #		
Name of Co-Tenant			Date of Birth	
Driver's License #		Social Security #		
Present Address		City	State	Zip
How long at present address?	Phone	Landlord/Agent		Phone
Previous Address		City	State	Zip
How long at previous address?	Landlord/Agent		Phone	
Occupants/Relationship/Ages				
Animal	Type	Breed	Weight	Age
Car Make	Model	Year	Color	License #

Occupation			
	Present Occupation	Prior Occupation	Co-Tenant
Occupation			
Employer			
Business Address			
Business Phone			
Type of Business			
Postion Held			
Name and Title of Superior			
How Long?			
Monthly Gross Income			

Emergency Contact			
Name		Relationship	Phone
Address		City	State Zip

Have you ever had adjudication withheld or been convicted of a crime? Yes _____ No _____

Have you ever filed a petition of bankruptcy? Yes__ No__ Have you been evicted from any tenancy or had an eviction notice served on you? Yes__ No__ Have you ever willfully and intentionally refused to pay any rent when due? Yes__ No__

I DECLARE THAT THE FOREGOING IS TRUE AND CORRECT, AND HEREBY AUTHORIZES AN INVESTIGATIVE CONSUMER REPORT AND VERIFICATION OF ANY AND ALL INFORMATION RELATING TO RESIDENTIAL HISTORY (RENTAL OR MORTGAGE), EMPLOYMENT HISTORY, CRIMINAL HISTORY RECORDS, COURT RECORDS, AND CREDIT REPORTS. I ALSO AGREE THAT THE LANDLORD MAY TERMINATE ANY AGREEMENT ENTERED INTO IN RELIANCE ON ANY MISSTATEMENT MADE ABOVE.

Applicant: _____

Date: _____

Cell: _____

Applicant: _____

Date: _____

Cell: _____

(Initial)

_____ The statements given on this application are submitted for the purpose of obtaining credit and are certified to be true, complete and correct.

_____ Applicant expressly authorizes Palm Properties of Central Florida, Inc. to make inquiries of others concerning the foregoing information, including, but not limited to, procuring a consumer reporting agency and to provide information arising out of applicants transactions with others.

_____ Any person named herein is expressly authorized to Palm Properties of Central Florida, Inc. with information in connection with this application. This application shall remain the property of Palm Properties of Central Florida, Inc. I agree Palm Properties of Central Florida, Inc. may terminate any agreement entered into in reliance of any misstatement made on this application.

_____ In the event this application is denied and/or considered void for any reason and the applicant is entitled to a refund of any part of their deposit, it is understood that said deposit will be returned to applicant by check, through regular mail only. Applicant will not be refunded cash and cannot pick up their check at any office location. There will be no exceptions. It is further understood that said deposit will be made payable to all applicants and mailed to the current address given. In the event the deposit is made by personal check, the required time for clearance must be taken into consideration.

_____ It is expressly understood that this transaction involves a lease agreement and the applicant acknowledges they have been advised of the importance of rental insurance for contents and belongings. In the event the applicant decides that they do not desire the said insurance, they agree to hold harmless, Palm Properties of Central Florida, Inc., its agents, the property owner, and all parties involved in this transaction.

_____ Should applicant intend to place floatation bedding in said property, renters' insurance is required, naming Palm Properties of Central Florida, Inc., as loss payee for any loss or damage as a result of having the said floatation bedding.

_____ All parties acknowledge that Palm Properties of Central Florida, Inc. are the agents of the Owner and will be paid by the Owner.

_____ Applicant acknowledges this instrument has been signed before any lease agreement has been signed.

_____ Applicant acknowledges this instrument as an addendum to a Lease Agreement and when executed is made an integral part of the aforementioned agreement.

_____ All reservation deposits and/or rental payments are non-refundable upon approval and/or signing of Lease Agreement. All application fees are non-refundable at any time.

_____ I have read, understand, and agree to the above information.

Applicant(s) represents that all of the above statements information on the application for rental are true and complete, and hereby authorizes an investigative consumer report and verification of any and all information relating to residential history (rental or mortgage), employment history, criminal history records, court records, and credit reports. Applicant acknowledges that false or omitted information herein may constitute grounds for rejection of this application, termination of occupancy, and/or forfeiture of fees or deposits and may constitute a criminal offense under the laws of this State. I/We hereby release ASAP and any of the above from any liability and responsibility arising from their doing so. Facsimiles of this authorization may be used to facilitate multiple inquiries. In the event you receive a facsimile of this authorization, it should be treated as an original and the requested information should be released to facilitate my/our application for residency.

Applicant _____ **Date** _____

Applicant _____ **Date** _____