



Here is the rental application package.

1. The application package must be **FILLED OUT ENTIRELY** and **SIGNED BY ALL PARTIES**.
2. We must have a copy of **ALL** the applicants' Driver's License(s) or other photo ID.
3. We must have the proof of income with the following documents:
 - 2 Most recent months paystubs;
 - Last year tax return;
 - Last recent months bank statements.
4. We must have payment **BEFORE** we can process the application. The application fee is **\$70.00** for each adult applicant and must be made in cash, cashier's check or money order. **PERSONAL CHECKS CANNOT BE ACCEPTED**. Once an application **is processed**, regardless of approval or denial, there is no refunding of the application fee(s) under any circumstances.

When we process the application, we check the following:

- Monthly Income - total should be **at least** three (3) times the rent
 - Felony Criminal records
 - Eviction records
 - Previous residency
 - Credit Report
5. You must sign and date the **REQUEST FOR RENTAL and EMPLOYMENT VERIFICATION** documents.
 6. You must sign and date the **HOLDING A RENTAL PROPERTY** document.
 7. You must sign and date the **INITIAL PRE-OCCUPANCY INFORMATION** document.
 8. You must sign and date the **PET APPLICATION** document, if applicable.

If you have any questions, please call us at **407-351-9630**.

Address: 8751 Commodity Cir. Ste. 11, Orlando, FL 32819
Phone: 407-351-9630 Fax: 866-830-5443
Email: ACFRealty@gmail.com



RENTAL / CREDIT APPLICATION

DATE: _____ APPLICATION FEE PAID? yes or no HOLDING DEPOSIT PAID? yes or no
\$70 per individual adult on lease amount paid \$ _____

ALL INFORMATION MUST BE GIVEN IN ORDER TO PROCEED

This application is for the property located at _____.

The rental period requested is from ____/____/20____ to ____/____/20____ RENT=\$_____
SEC.DEP.=\$_____

APPLICANT'S INFORMATION - PLEASE PRINT!

NAME: _____ SSN# _____ - _____ - _____
First name Middle initial Last name

CONTACT#s _____
home phone cell phone work phone email address

CURRENT RESIDENCE _____ HOW LONG? _____
Street # Street Name City State Zip

LANDLORD/MORT. CO. _____ PHONE# _____ - _____ - _____

CURRENT MONTHLY PAYMENT \$ _____ WHY MOVING? _____

(If current residence is less than 2 years, then you must complete Previous Residence information)

PREVIOUS RESIDENCE _____ HOW LONG? _____
Street # Street Name City State Zip

PREV.LANDLORD/MORT. CO. _____ PHONE# _____ - _____ - _____

PREVIOUS MONTHLY PAYMENT \$ _____ WHY MOVED? _____

EMPLOYER _____ PHONE# _____ - _____ - _____

YEARLY INCOME \$ _____ (documented proof of income required)

DRIVER'S LICENSE# _____ - _____ VEHICLE TAG# _____
State License Number

Have you ever been convicted of any crime? yes / no Have you ever been evicted from a rental? yes / no

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IN CASE OF EMERGENCY, NOTIFY _____ PHONE# _____ - _____ - _____

CO-APPLICANT'S INFORMATION - PLEASE PRINT!

NAME: _____ SSN# _____ - _____ - _____
First name Middle initial Last name

CONTACT#s _____
home phone cell phone work phone email address

CURRENT RESIDENCE _____ HOW LONG? _____
Street # Street Name City State Zip

LANDLORD/MORT. CO. _____ PHONE# _____ - _____ - _____

CURRENT MONTHLY PAYMENT \$ _____ WHY MOVING? _____

(If current residence is less than 2 years, then you must complete Previous Residence information)

PREVIOUS RESIDENCE _____ HOW LONG? _____
Street # Street Name City State Zip

PREV. LANDLORD/MORT. CO. _____ PHONE# _____ - _____ - _____

PREVIOUS MONTHLY PAYMENT \$ _____ WHY MOVED? _____

EMPLOYER _____ PHONE# _____ - _____ - _____

YEARLY INCOME \$ _____ (documented proof of income required)

DRIVER'S LICENSE# _____ - _____ VEHICLE TAG# _____
State License Number

YEAR _____ MAKE _____ MODEL _____ COLOR _____

Have you ever been convicted of a crime? yes / no Have you ever been evicted? yes / no

RELATIONSHIP TO APPLICANT _____

IN CASE OF EMERGENCY, NOTIFY _____ PHONE# _____ - _____ - _____



GENERAL INFORMATION – PLEASE PRINT!

TOTAL # OF ADULTS _____ TOTAL # CHILDREN _____ TOTAL # OF PETS _____
(over 18) (18 and under) (dogs, cats, fish, birds, etc.)

Please list the FULL NAMES and DOBs of ALL INTENDED OCCUPANTS, INCLUDING YOURSELF !!

Full Name _____	Date of Birth _____	Gender: male / female
Full Name _____	Date of Birth _____	Gender: male / female
Full Name _____	Date of Birth _____	Gender: male / female
Full Name _____	Date of Birth _____	Gender: male / female
Full Name _____	Date of Birth _____	Gender: male / female
Full Name _____	Date of Birth _____	Gender: male / female
Full Name _____	Date of Birth _____	Gender: male / female

PLEASE READ THE FOLLOWING STATEMENT CAREFULLY BEFORE SIGNING THIS APPLICATION!

I hereby certify that the above information is true and accurate to the best of my knowledge. Further, I certify that I have never been convicted of a felony offense, arrested for, put on probation for, nor had adjudication withheld or deferred for a felony offense. Further, I understand that *All Central Florida Realty* will run an **IN-FILE CREDIT REPORT**, a **CRIMINAL HISTORY** check and an **EVICTON** check on each individual for the sole purpose of qualifying for a rental property and that the application fee is **NON-REFUNDABLE** for any reason once the application has been processed, regardless of whether the application is accepted or rejected. A valid picture ID for each applicant (for example, driver's license) **MUST** accompany this application. Further, any monies accepted as a Holding Deposit to hold a property for me, will be fully refunded if I do not qualify; if, however, I do qualify, then any monies paid as a Holding Deposit to hold a property **will be fully forfeited** if I do not perform within the specified time frame. If I do perform, then the Holding Deposit will be applied towards the required Security Deposit or any other outstanding monies due. I also understand that any false statement or misstatement made on this document will constitute Default under my lease.

Applicant Signature

Date

Co-applicant Signature

Date

We cannot process this application unless all required information is provided AND ALL APPLICANTS SIGN!!

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REQUEST FOR RENTAL VERIFICATION

DATE: _____ TO: _____

SENT BY: Neyla Fernandes, Property Manager

SENDER'S PHONE: 407-351-9630 Fax: 866-830-5443

The information contained in this faxed message is intended **ONLY** for the personal use of the designated recipient named above.

We would appreciate a timely reply of the following information. Thank you.

TENANT NAME: _____

ADDRESS: _____

LENGTH OF TENANCY: FROM _____ TO _____

MONTHLY RENT:\$ _____ ANY PETS? yes / no

LATE PAYMENTS: _____ # NSF's: _____

WAS PROPER NOTICE GIVEN? yes / no

WOULD YOU RENT TO THEM AGAIN? yes / no

APPLICANT: I agree to allow **All Central Florida Realty** to obtain the above information from any appropriate, available sources. Please fax the information back to the above fax number (866-830-5443). Thank you.

APPLICANT'S SIGNATURE: _____ DATE: _____

Person responsible for this information:

NAME: _____ POSITION: _____

SIGNATURE: _____ DATE: _____

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HOLDING A RENTAL PROPERTY

In order to secure a rental property so no one else can rent that specific property, you must do the following:

1. Complete a rental application (**\$70 fee for each adult**). Payment must be made in cash, cashier's check or money order. **PERSONAL CHECKS CANNOT BE ACCEPTED**. Once an application has been **processed**, regardless of acceptance or denial, there is no refunding of the application fee(s) under any circumstances.
2. Then, if you want us to hold a rental property for you, we will require **a Holding Deposit** as follows:
 - a) **\$750.00** will hold the property for you for up to 7 days
 - b) **\$1,500.00** or **a full security deposit** will hold the property for you for up to 15 days

NOTE: PERSONAL CHECKS CANNOT BE ACCEPTED

- If your application is denied, then you will receive a full refund of your Holding Deposit.
- If your application is approved, then the Holding Deposit will be subtracted from any monies owed at move-in.
- If your application is approved **BUT** you do not perform within the specified time frame (15 days at most), then you will **FORFEIT THE ENTIRE HOLDING DEPOSIT**.

If you want us to hold a property, but need **more than 15 days**, then you must pay a Holding Deposit (as in **#2b** above) and you will then be given a **FIRST RIGHT of REFUSAL**. That is, if someone else wants to rent the same property sooner than you do, then you will be given a choice. You can either:

- Take the property on the same day that the other person would have taken it. Then, all the above rules would still apply and you would have to take the property sooner than you originally wanted, **or**
- Give up your right to the property and decide not to rent it. In that case, you would get **your full HOLDING DEPOSIT returned to you** and the other person would get the property.

By signing below, you acknowledge that you have read and understand the requirements associated with holding a rental property.

Responsible Tenant(s) - At least one Legal Tenant's signature represents sufficient notification Date

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INITIAL PRE-OCCUPANCY INFORMATION

UTILITY COMPANIES

ELECTRIC	407-629-1010	PROGRESS ENERGY (ORL)
ELEC / WATER	407-933-7777	KISSIMMEE UTILITY AUTHORITY (KUA)
WATER	407-423-9018	ORLANDO UTILITIES COMMISSION (OUC)
WATER	407-836-5515	ORANGE COUNTY UTILITIES (OCU)
WATER	1-888-776-3837	COMMERCIAL WATER & ENERGY (KISS.)
GAS	877-832-6747	TECO (was PEOPLE'S GAS)
PHONE	888-755-6500	AT&T (BELL SOUTH)
PHONE	1-800-339-1811	SPRINT
CABLE	407-843-2480	ADELPHIA (ORANGE COUNTY)
	407-870-8433	ADELPHIA (OSCEOLA COUNTY)
	407-847-8001	BRIGHTHOUSE

ORANGE COUNTY PUBLIC SCHOOLS - 407-317-3233 PUPIL ASSIGNMENT - www.ocps.net

CHANGE OF ADDRESS - UNITED STATES POST OFFICE - www.usps.com

NOTE: In order to get a mailbox key, you must take your lease to the nearest Post Office.
They will assign you a box and get you a key. If it's a condo, you need to go to the HOA.

NOTE: Tenant understands and agrees that Tenant will initiate in Tenant's name any and all necessary utility services that are appropriate for the property (electric, water, gas, etc.). Further, the Tenant shall pay all necessary deposits. Tenant also acknowledges that the Landlord can order utility service(s) to be terminated out of Landlord's name within 2 days after Lease commencement and that Tenant may therefore have no utility services if Tenant fails to initiate such services on a timely basis. Failure of Tenant to initiate and properly maintain utility services can result in Default under the lease.

Responsible Tenant(s) - At least one Legal Tenant's signature represents sufficient notification _____ Date _____

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PET APPLICATION

ALL OF THE FOLLOWING INFORMATION MUST BE COMPLETED IN ORDER TO PROCEED

This Pet application is made as a part of the Rental / Credit Application for the rental property located at: _____ Florida, _____.
Full address of the property being applied for zip code

I do hereby request that my pet be approved to reside with me during the term of my lease agreement. **If approved, I'll pay a non-refundable pet fee of \$350, per pet.**

Type of pet: _____ Name: _____ Sex: _____ Age: _____

Breed: _____ Weight: _____ Expected future weight: _____

Is your pet a 'service animal' or a 'medically necessary pet'? yes / no

Do you have another pet? yes / no (if yes, you must have a separate pet application for each pet).

In consideration of having to go through this pet application process, **I ATTEST TO THE FOLLOWING:**

1. My pet is well-trained and not dangerous to others. My pet does not have a propensity to be vicious. My pet does not bark excessively. No other Landlord has complained about my pet in the past.
2. My pet is not pregnant and will not become pregnant during my residency. If my pet becomes pregnant, I will be considered in violation of this agreement and, at the Owner's option, must immediately remove the pet or incur additional pet fees as defined in the Lease.
3. If my pet causes damage or destruction to persons or property, I agree to abide by the terms of the Lease and I will be financially responsible for such damage or destruction. If there are any false statements or mis-statements on this application or if my pet becomes a nuisance or otherwise violates the terms of this application, then the Landlord may terminate my pet's right of occupancy and / or my Lease, thereby subjecting me to eviction.

I will attach a picture of my pet to this application.

I understand that the Pet Application fee will be refunded if my pet is not approved. If approved, then the application fee is not refundable under any circumstance and will not be applied toward any other obligation.



Responsible Tenant(s) - At least one Legal Tenant's signature represents sufficient notification Date

EMPLOYMENT VERIFICATION

Applicant: FILL OUT YOUR NAME AND SIGN AT THE BOTTON ONLY.

Employee name: _____

EMPLOYER PLEASE FILL THIS OUT:

Company name: _____

Company address: _____

1. First day of employment: ____/____/____

2. Present position: _____

3. Present monthly salary : \$ _____

4. If hourly, present hourly amount: \$ _____

5. If hourly, how many hours per week: _____

6. Commission/bonus (average last 2 years): \$ _____

7. Is this a temporary employment: _____

8. What is the probability of continued employment from 0% to 100%? _____

Person giving this information: _____ Position: _____

Employer's signature: _____ Date: _____

Applicant's signature: _____ Date: _____