

Long Management Rental Application

Please do not leave any blank spaces! Make sure and sign the bottom of the application. Referred by: \_\_\_\_\_

Name: Last \_\_\_\_\_, First \_\_\_\_\_, MI \_\_\_\_\_ SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Drivers License# \_\_\_\_\_, ST \_\_\_\_\_

Landline \_\_\_\_\_ Cell Number \_\_\_\_\_ Email address \_\_\_\_\_

Spouse: \_\_\_\_\_, MI \_\_\_\_\_ SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Drivers License# \_\_\_\_\_, ST \_\_\_\_\_

Landline \_\_\_\_\_ Cell Number \_\_\_\_\_ Email address \_\_\_\_\_

Children, if any: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

Pets: Number \_\_\_\_\_ Type(s) \_\_\_\_\_, Breed(s) \_\_\_\_\_, Weight(s) \_\_\_\_\_, Age(s) \_\_\_\_\_

Current Street Address \_\_\_\_\_ City/State/Zip Code \_\_\_\_\_

Current Landlord/Mortgage Holder \_\_\_\_\_ Phone \_\_\_\_\_ Monthly Rent/Mortgage \_\_\_\_\_

Length of Residence: FROM \_\_\_\_\_ TO \_\_\_\_\_ Reason for moving \_\_\_\_\_

Previous Address \_\_\_\_\_ City/State/Zip Code \_\_\_\_\_

Prior Landlord/Mortgage Holder \_\_\_\_\_ Phone \_\_\_\_\_ Monthly Rent/Mortgage \_\_\_\_\_

Length of Residence: FROM \_\_\_\_\_ TO \_\_\_\_\_ Reason for moving \_\_\_\_\_

Present Employer \_\_\_\_\_ Phone \_\_\_\_\_ Supervisor \_\_\_\_\_

Position \_\_\_\_\_ Income \$ \_\_\_\_\_ per \_\_\_\_\_ Length of employment \_\_\_\_\_

Prior Employment if less than 6 months

Prior Employer \_\_\_\_\_ Phone \_\_\_\_\_ Supervisor \_\_\_\_\_

Position \_\_\_\_\_ Income \$ \_\_\_\_\_ per \_\_\_\_\_ Length of Employment \_\_\_\_\_

Spouse's Employer \_\_\_\_\_ Phone \_\_\_\_\_ Supervisor \_\_\_\_\_

Position \_\_\_\_\_ Income \$ \_\_\_\_\_ per \_\_\_\_\_ Length of employment \_\_\_\_\_

Other Income \$ \_\_\_\_\_, per \_\_\_\_\_, Source \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Vehicle Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ Tag Number \_\_\_\_\_

Vehicle Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ Tag Number \_\_\_\_\_

Have you or your spouse left owing money to a landlord or had eviction filed? Yes \_\_\_\_\_ N \_\_\_\_\_ (If yes, please describe the circumstances of the back of the application)

Have you ever had adjudication withheld or been convicted of a crime? Yes \_\_\_\_\_ N \_\_\_\_\_ (same as above)

Is anyone in your household a smoker? Yes \_\_\_\_\_ N \_\_\_\_\_

AUTHORIZATION OF RELEASE OF INFORMATION: Applicant represents that all of the above information and statements on the application are true and complete any hereby authorizes a consumer report including, but not limited to, residential history, employment history, criminal history, court records and credit records. This application must be signed before management can process it. Applicant acknowledges that false or omitted information herein may constitute grounds for rejection of this application, termination of right of occupancy, and/or forfeiture of fees or deposits and may constitute a criminal offense under the laws of this states/ Resident agrees to pay a non-refundable application fee of \$ \_\_\_\_\_ Remitted to park Plaza Apts. 101 S. Bumby Avenue, Orlando, Fl. 32803. Once management has received the application, the applicant will be notified of approval or denial within 72 hours. After the minimum-security deposit is paid to management to secure the apartment, the applicant acknowledges by signing below that he or she has 72 hours thereafter to cancel said security deposit or it will be forfeited to management.

Applicants Signature/Date \_\_\_\_\_

Spouse Signature/Date \_\_\_\_\_

Apt# \_\_\_\_\_
M/I Date \_\_\_\_\_
Sec.Dep. \$ \_\_\_\_\_
Date Received \_\_\_\_\_
Pet Dep./Pet Fee \$ \_\_\_\_\_
Pro-Rated Rent \$ \_\_\_\_\_