

Application for Residency The Breakers Resort

Apt No. _____ Rent _____ Other Rent _____ M/I Date _____ Phone Number _____ Leasing Agent: _____
 Apt Size _____ Security Deposit _____ Other Deposit _____ No. of Occupants _____ Lease Term _____ mo. Pets? _____
 Concession offered at visit: _____

NAME (LAST)	(FIRST)	(MI)
DATE OF BIRTH	SOCIAL SECURITY NO.	- -
DRIVER'S LICENSE NO.	STATE	
OCCUPATION	ANNUAL GROSS INCOME	
CO-APPLICANT (LAST)	(FIRST)	(MI)
DATE OF BIRTH	SOCIAL SECURITY NO.	- -

Phone Number: _____
E-mail Address: _____

VEHICLES: TYPE COLOR MAKE STATE LICENSE PLATE NO.

LIST OTHERS WHO WILL RESIDE IN APARTMENT ON A PERMANENT BASIS:

NAME: _____ RELATIONSHIP TO APPLICANT _____ DOB _____
 NAME: _____ RELATIONSHIP TO APPLICANT _____ DOB _____
 NAME: _____ RELATIONSHIP TO APPLICANT _____ DOB _____
 NAME: _____ RELATIONSHIP TO APPLICANT _____ DOB _____

PRESENT ADDRESS:

STREET: _____ APARTMENT NO. _____
 CITY: _____ STATE _____ ZIP _____
 RENT/OWN/LIVE WITH PARENTS? _____ DATES _____ TO _____ MONTHLY RENT \$ _____
 LANDLORD/LENDER: _____ PHONE NO. TO LANDLORD _____

PREVIOUS ADDRESS:

STREET: _____ APARTMENT NO. _____
 CITY: _____ STATE _____ ZIP _____
 RENT/OWN/LIVE WITH PARENTS? _____ DATES _____ TO _____ MONTHLY PAYMENT _____
 LANDLORD/LENDER: _____ PHONE NO. TO LANDLORD _____

CURRENT EMPLOYER:

NAME: _____ PHONE NO. _____
 Address: _____ City _____ State _____ Zip _____
 EMPLOYMENT DATE _____ POSITION _____ SUPERVISOR NAME _____ MONTHLY SALARY \$ _____

CO-APPLICANTS EMPLOYER:

NAME: _____ PHONE NO. _____
 EMPLOYMENT DATE _____ POSITION _____ SUPERVISOR NAME _____ SALARY _____

OTHER INCOME (I.E. SOCIAL SECURITY, CHILD SUPPORT):

TYPE OF INCOME: _____ SOURCE _____ AMOUNT PER MO. _____
 TYPE OF INCOME: _____ SOURCE _____ AMOUNT PER MO. _____

RELATIVES/EMERGENCY CONTACT (NOT RESIDING WITH YOU):

NAME: _____ RELATIONSHIP _____ PHONE NO. _____
 ADDRESS: _____ CITY _____
 STATE _____ ZIP _____ Email: _____

ANOTHER RELATIVES/EMERGENCY CONTACT (NOT RESIDING WITH YOU):

NAME: _____ RELATIONSHIP _____ PHONE NO. _____

ADDRESS: _____ CITY _____

STATE _____ ZIP _____ Email: _____

PET INFORMATION:

TYPE: _____ BREED _____ WEIGHT _____ lbs.

KEEPING A PET REQUIRES CONSENT OF MANAGEMENT, PAYMENT OF APPLICABLE FEES/DEPOSITS, AND EXECUTION OF PET ADDENDUM. HANDICAPPED/ASSISTANCE ANIMALS USED FOR DISABILITIES ARE NOT CONSIDERED PETS.

HOW DID YOU HEAR ABOUT OUR PROPERTY? _____

Referred by: _____ Apt # _____

The Civil Rights Act of 1968, as amended by the Fair Housing Amendments Act of 1988, prohibits discrimination in the rental of housing based on race, color, religion, sex, handicap, familial status or national origin. The Federal Agency, which administers compliance with this law, is the U.S. Department of Housing and Urban Development.

This is to inform you that as part of our procedure for processing your application, an Investigative Consumer Report may be prepared whereby information's obtained through personal interviews with your landlord, employer, or others with whom you are acquainted. This inquiry includes information as to your character, general reputation, mode of living, and credit report. You have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation (Fair Credit Reporting Act). I/We hereby agree, in the event of the approval of this application, to execute a lease in accordance with the terms set forth in this rental application and my/our rental liability shall commence during _____, 2010, pursuant to the terms of the lease. That if I/We fail to sign the lease and/or pay agreed rental, Security deposit, utility fees, or other required charges as shown on this application the \$200.00 holding fees accompanying this application shall be retained by landlord as liquidated damages and I/We agree to this amount being retained by landlord as a reasonable estimate of actual damages to landlord if I/We failed to perform as stated above after approval. I/We also do not believe the loss of this holding fee is an unfair trade practice if I/We fail to perform as stated above after approval. I/We understand that the holding fees accompanying this application are non-refundable after three (3) days. Owner and/or agent for the owner reserve the right to reject this application and to refuse possession of the above-mentioned accommodation. I/We understand that any fees charged for running this application are non-refundable once this application has been run. I/We have read the forgoing; certify that the information herein is TRUE and CORRECT, that his application is submitted for the purpose of inducing approval of this application in my/our behalf. Any "yes" or "no" question unanswered shall be considered a "yes".

HAVE YOU EVER BEEN CONVICTED OF OR PLED GUILTY OF "NO CONTEST" TO ANY FELONY OR MISDEMEANORT? YES [] NO []

HAVE YOU EVER BEEN CONVICTED OF OR PLED GUILTY OF "NO CONTEST" TO A SEXUAL OFFENSE? YES [] NO []

IF YES, PLEASE EXPLAIN, PROVIDING THE LOCATION, DATE AND NATURE OF THE OFFENSE:

BY SIGNING THIS APPLICATION, YOU DECLARE THAT ALL OF YOUR RESPONSES ARE TRUE AND COMPLETE AND AURHORIZE AGENT OF THE LESSOR TO VERIFY THIS INFORMATION REFERENCES, AND CREDIT RECORDS, AND PERFORM A CRIMINAL BACKGROUND CHECK. ANY FLASE STATEMENT ON THIS APPLICATION CAN LEAD TO REJECTION OF YOUR APPLICATION OR IMMEDIATE TERMINATION OF YOUR LEASE.

All required Rental Application information (proof of income, additional applications, etc) must be submitted within three (3) days of the date below. Thus, required Rental Application information must be submitted by end of business on _____.

SIGNATURE

PRINTED NAME

DATE

