



# RENTAL APPLICATION

Every occupant over the age of 18 **MUST** fill out a separate application (even if married). Please fill out this form **COMPLETELY** and sign where indicated.

## INSTRUCTIONS FOR COMPLETING THE

### INSTRUCTIONS FOR COMPLETING RENTAL APPLICATION

1. Please fill out the application completely, including phone numbers of all landlords and references.
2. You must include a copy of your Driver's License or FL ID card.
3. You must include a copy of your Social Security Card.
4. Contact us to submit the application along with the following application fee:
  - a. \$50.00 for 1 adult occupying the property
  - b. \$85.00 for 2 adults occupying the property
  - c. \$145.00 for 3 adults occupying the property

5. Make money order(s) payable to:

32 West Realty, Inc.  
P. O. Box 6065  
West Palm Beach, FL 33405

Office phone: 561-429-6051

Fax: 561-429-6053 – you may fax applications but they will not be processed without the appropriate application fees.

Please list the names of the individuals who you authorize to receive confidential information concerning your application process from our office:

\_\_\_\_\_

\_\_\_\_\_

Please sign here to acknowledge the authorization of information to the foregoing individuals.

SIGN HERE: \_\_\_\_\_

Date: \_\_\_\_\_, 2011

Your best phone numbers are: ( ) \_\_\_\_\_  
( ) \_\_\_\_\_

THANK YOU for your interest in our unit.

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*The following is the basis we will use to consider your renewal application.  
Please read it carefully and sign where indicated.*

### **Application Requirements**

Every adult must submit a fully completed, dated and signed residency application and fee. Applicant must provide a state issued photo identification card or a driver's license, and a social security card. A non-refundable application will be required for all adult applicants.

### **Total Household Income**

We will verify your income. Applicants must have a combined (after tax) income of at least three times the monthly rent. Self-employed applicants may be required to produce tax returns and/or bank statements. Non-employed applicants must provide proof of income. We reserve the right to require a co-signer.

### **Credit Reporting**

We will obtain your credit report(s). Credit history must demonstrate appropriate care and concern for all financial obligations. Our policy is to report all debts to credit reporting agencies.

### **Rental History**

We will contact your previous landlord(s). Rental history must reflect timely payment of rent, no complaints regarding noise, disturbance or illegal activities, proper notice to vacate, and only normal "wear & tear" to the property upon vacating.

### **Criminal History**

We will search criminal records. These records must show:

- No Felony conviction within 7 years
- No Misdemeanor convictions within 5 years
- No sexual offenses ever

### **Pet Policy**

No pets of any kind are permitted without specific written permission of landlord.  
 Property identified, trained, and managed pets may be allowed in certain properties. Additional rent and/or deposits will apply. Pet rent and/or deposits may be waived for medically necessary pets.

### **Occupancy Requirements**

The number of occupants must be in compliance with general HUD standards and guidelines for the applied for unit.

- No more than 2 persons may occupy a 1 bedroom dwelling.
- No more than 4 persons may occupy a 2 bedroom dwelling.
- No more than 6 persons may occupy a 3 bedroom dwelling.
- No more than 8 persons may occupy a 4 bedroom dwelling.

### **Copy of Lease**

You are entitled to an advanced copy of the lease which will be executed if your rental application is approved.

### **No Verbal Agreements**

Any agreements must be in writing and signed by both parties.

**By signing below, I indicate that I have read and agree to the rental agreements and authorize a background and credit check be obtained.**

\_\_\_\_\_  
Applicant

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

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## RENTAL PROPERTY INFORMATION

ADDRESS: \_\_\_\_\_  
STREET NO. \_\_\_\_\_ CITY AND STATE \_\_\_\_\_ ZIP \_\_\_\_\_

RENTAL AMOUNT FOR PROPERTY: \$ \_\_\_\_\_ DATE YOU WANT TO MOVE IN: \_\_\_\_\_, 20\_\_

HOW MANY ADULTS (OVER 18) WILL OCCUPY THE UNIT?

ATTORNEYS' NAME: \_\_\_\_\_ CONTACT NO.: \_\_\_\_\_

## PERSONAL INFORMATION

FIRST NAME	MIDDLE	LAST	SEX	SS#
DATE OF BIRTH	MARITAL STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED SINCE		DRIVERS LICENSE #	STATE
PHONE <input type="checkbox"/> CELL <input type="checkbox"/> HOME	PHONE EXT	EMAIL		
PRESENT HOME ADDRESS		CITY/STATE/ZIP		
LENGTH OF TIME	PRESENT LANDLORD	LANDLORD PHONE		
REASON FOR LEAVING	AMOUNT OF RENT	IS PRESENT RENT UP TO DATE? <input type="checkbox"/> YES <input type="checkbox"/> NO		
PREVIOUS HOME ADDRESS		CITY/STATE/ZIP		
LENGTH OF TIME	PREVIOUS LANDLORD	LANDLORD PHONE		
REASON FOR LEAVING	AMOUNT OF RENT	WAS RENT UP TO DATE? <input type="checkbox"/> YES <input type="checkbox"/> NO		
NEXT PREVIOUS HOME ADDRESS (IF LESS THAN 2 YRS)		CITY/STATE/ZIP		
LENGTH OF TIME	NEXT PREVIOUS LANDLORD	LANDLORD PHONE		
REASON FOR LEAVING	AMOUNT OF RENT	WAS RENT UP TO DATE? <input type="checkbox"/> YES <input type="checkbox"/> NO		

## PROPOSED OCCUPANTS

NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE

## PROPOSED PETS (PET DEPOSIT MUST BE PAID)

NAME	TYPE/BREED	<input type="checkbox"/> INDOOR <input type="checkbox"/> OUTDOOR	AGE
NAME	TYPE/BREED	<input type="checkbox"/> INDOOR <input type="checkbox"/> OUTDOOR	AGE

## VEHICLE(S) INFORMATION (include campers/boat trailers, RVs, etc.)

YEAR	MAKE	MODEL	COLOR	PLATE #	STATE
YEAR	MAKE	MODEL	COLOR	PLATE #	STATE
YEAR	MAKE	MODEL	COLOR	PLATE #	STATE
YEAR	MAKE	MODEL	COLOR	PLATE #	STATE

## BANKING REFERENCE

BANK NAME:	PHONE NO.:
ADDRESS:	CHECKING ACCOUNT NO.:
	SAVINGS ACCOUNT NO.:

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## EMPLOYMENT

CURRENT EMPLOYER	OCCUPATION	HOURS/WEEK
SUPERVISOR	PHONE - - - - - EXT: - - - - -	DATES EMPLOYED
ADDRESS		CITY/STATE/ZIP
PREVIOUS EMPLOYER	OCCUPATION	HOURS/WEEK
SUPERVISOR	PHONE - - - - - EXT: - - - - -	DATES EMPLOYED
ADDRESS		CITY/STATE/ZIP

## INCOME

CURRENT \$ _____ <input type="checkbox"/> WEEKLY <input type="checkbox"/> BIWEEKLY INCOME <input type="checkbox"/> MONTHLY <input type="checkbox"/> YEARLY	SOURCE	PROOF OF INCOME <input type="checkbox"/> YES <input type="checkbox"/> NO
CURRENT \$ _____ <input type="checkbox"/> WEEKLY <input type="checkbox"/> BIWEEKLY INCOME <input type="checkbox"/> MONTHLY <input type="checkbox"/> YEARLY	SOURCE	PROOF OF INCOME <input type="checkbox"/> YES <input type="checkbox"/> NO
CURRENT \$ _____ <input type="checkbox"/> WEEKLY <input type="checkbox"/> BIWEEKLY INCOME <input type="checkbox"/> MONTHLY <input type="checkbox"/> YEARLY	SOURCE	PROOF OF INCOME <input type="checkbox"/> YES <input type="checkbox"/> NO
LIST ALL INCOME THAT MAY BE USED TO COVER HOUSING EXPENSES		EMPLOYMENT INCOME \$ _____ 1099 VOUCHER \$ _____
IF SECTION 8: SECTION 8 VOUCHER \$ _____	COUNSELOR'S NAME: _____ CONTACT NUMBER: _____	HOUSING OFFICE: _____

## CREDIT CARD / FINANCIAL INFORMATION

CAR LOAN LIEN HOLDER	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE # - - - - -
CREDIT CARD COMPANY	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE # - - - - -
CREDIT CARD COMPANY	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE # - - - - -
CREDIT CARD COMPANY	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE # - - - - -

## PERSONAL REFERENCE INFORMATION / EMERGENCY

PERSONAL REFERENCE	PHONE - - - - - <input type="checkbox"/> CELL <input type="checkbox"/> HOME	PHONE - - - - - <input type="checkbox"/> CELL <input type="checkbox"/> HOME
RELATIONSHIP	ADDRESS	CITY/STATE/ZIP
PERSONAL REFERENCE	PHONE - - - - - <input type="checkbox"/> CELL <input type="checkbox"/> HOME	PHONE - - - - - <input type="checkbox"/> CELL <input type="checkbox"/> HOME
RELATIONSHIP	ADDRESS	CITY/STATE/ZIP
EMERGENCY CONTACT	PHONE - - - - - <input type="checkbox"/> CELL <input type="checkbox"/> HOME	PHONE - - - - - <input type="checkbox"/> CELL <input type="checkbox"/> HOME
RELATIONSHIP	ADDRESS	CITY/STATE/ZIP
EMERGENCY CONTACT	PHONE - - - - - <input type="checkbox"/> CELL <input type="checkbox"/> HOME	PHONE - - - - - <input type="checkbox"/> CELL <input type="checkbox"/> HOME
RELATIONSHIP	ADDRESS	CITY/STATE/ZIP

## APPLICANT QUESTIONNAIRE / AUTHORIZATION

HAS APPLICANT EVER BEEN SUED FORBILLS? <input type="checkbox"/> YES <input type="checkbox"/> NO	HAS APPLICANT EVER BEEN LOCKED OUT OF THEIR APARTMENT BY SHERIFF? <input type="checkbox"/> YES <input type="checkbox"/> NO
HAS APPLICANT EVER BEEN BANKRUPT? <input type="checkbox"/> YES <input type="checkbox"/> NO	HAS APPLICANT EVER BEEN BROUGHT TO COURT BY LANDLORD? <input type="checkbox"/> YES <input type="checkbox"/> NO
HAS APPLICANT OR ANY OCCUPANT EVER BEEN ARRESTED FOR, CONVICTED OF, PUT ON PROBATION FOR, HAD ADJUDICATION WITHHELD OR DEFERRED FOR A MISDEMEANOR OR FELONY OFFENSE? <input type="checkbox"/> YES <input type="checkbox"/> NO	HAS APPLICANT EVER MOVED OWING RENT OR DAMAGED AN APARTMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO
HAS APPLICANT EVER BROKEN A RENTAL OR LEASE AGREEMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	IS THE TOTAL MOVE-IN AMOUNT AVAILABLE NOW (RENT AND DEPOSIT)? <input type="checkbox"/> YES <input type="checkbox"/> NO
HAS APPLICANT EVER HAD EVICTION FILED AGAINST HIM/HER <input type="checkbox"/> YES <input type="checkbox"/> NO	DOES APPLICANT HAVE ANY PETS OR INTENDS TO ACQUIRE ANY? <input type="checkbox"/> YES <input type="checkbox"/> NO
DOES APPLICANT OR ANY OCCUPANT CONSUME TOBACCO PRODUCTS OF ANY KIND? <input type="checkbox"/> YES <input type="checkbox"/> NO	DOES APPLICANT OR ANY OCCUPANT OWN ANY LIQUID FURNITURE? <input type="checkbox"/> YES <input type="checkbox"/> NO

Applicant represents that all of the statements and representations are true and complete, and hereby, authorizes verification of the above information, references and credit records. Applicant understands that an investigative consumer report including

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information about character, credit history, general reputation, personal characteristics, mode of living, and all public record information including criminal records may be made. Applicant agrees that false, misleading or misrepresented information may result in the application being rejected, will void a lease/rental agreement if any and/or be grounds for immediate eviction with loss of all deposits and any other penalties as provided by the lease terms if any. Applicant authorizes verification of all information by the Landlord and or Management Company. Applicant has 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. **NON REFUNDABLE APPLICATION FEE**—Applicant(s) has paid to Landlord and/or Management company herewith a **NON REFUNDABLE APPLICATION FEE** for costs, expenses and fees in processing the application.

**RENTAL DEPOSIT AGREEMENT**—Applicant has deposited an “**RENTAL DEPOSIT**” of \$ \_\_\_\_\_ in consideration for taking the dwelling off the market while the application is being processed. If applicant is approved by Landlord and/or Management and the lease is entered into and possession of the apartment is taken the “**RENTAL DEPOSIT**” shall be applied toward the security/damage deposit. If applicant is approved, but fails to enter into the lease within 3 days of verbal and/or written approval and/or take possession after lease signing, the **FULL “RENTAL DEPOSIT”** shall be forfeited to the Landlord or Management in addition to any penalties as provided in the lease if the lease has been signed by the applicant. The “**RENTAL DEPOSIT**” shall be refunded only if applicant is not approved. Keys will be furnished only after lease and other rental documents have been properly executed by all parties and only after applicable rentals and security deposits have been paid. This applicant is preliminary only, in no way implies that a particular rental unit shall be available and in no way obligates Landlord or Management to execute a lease or deliver possession of the proposed premises.

X \_\_\_\_\_ DATE \_\_\_\_\_  
 APPLICANT SIGNATURE

X \_\_\_\_\_ DATE \_\_\_\_\_  
 APPLICANT SIGNATURE

*If you have any questions about the interpretation or legality of this form, please consult an attorney or other qualified person.*

**NOTES:**

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**AUTHORIZATION TO RELEASE EMPLOYMENT INFORMATION**

By signing below, I authorize Employer to release information to 32 West Realty, Inc.

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_, 2011

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_, 2011



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## AUTHORIZATION TO RELEASE BACKGROUND AND CREDIT REPORT HISTORY

FRP West Palm I, LLC

By signing below, I authorize Landlord, FRP West Palm I, to obtain a full credit and background check.

\_\_\_\_\_  
Applicant:

Date: \_\_\_\_\_, 2011

\_\_\_\_\_  
Applicant:

Date: \_\_\_\_\_, 2011

*\*For use by E. Restrepo.*