## <u>Copy of Driver's License must be submitted with Application</u> <u>Text picture to 813-731-4085, Email: Lisa@AndersonRealtyTeam.com, Fax 813-856-4527</u>

\*\*Please make all application fees payable to Lisa Anderson, OR Can Send Paynal Payment Request Link

## **RENTAL APPLICATION**

Rental Address									
Monthly Rate \$	Deposit \$	]	Pet Deposit \$	et Deposit \$Anticipated Move In Date					
Applicant's Last Name	First N	/liddle	Birthdate	Drive	's License & State	Social S	Social Security #		
				<u> </u>					
Cell Ph.	Other Ph.			Emai	il:				
Co-Applicant's- Last F	First Midd	lle	Birthdate	Drive	's License & State	Social S	ecurity #		
Cell Ph.	Other Ph.		1	Emai	il:	I			
☐ Unmarried ☐Married	Rental to be occup	nied by:	Children(s)' Full	l Name(s	a) & Date(s) of Birth				
☐ Separated	Adults	Cinidicit(s) Full	Children(s)' Full Name(s) & Date(s) of Birth						
u separateu	Adults								
Do you have Date 9			Type & Size (V saming oft						
Do you have Pets?	How Many?		Type & Size (Ke	Type & Size (Keeping of pets requires a pet deposit and owner's consent					
Yes No	IIICTODY ***	0 0 0 4 1	III:ntorm Att = 1	D az : 4 : 1	III adam. V	D - ::	Cian a I		
				<u> Kental</u>	History Verification	on rorm			
Present Address	City State	Zip	How long?		Area Code		□ Rent		
			yrs	mths	& Phone #		□ Own		
Name & Address of Present Landlord or Mortgage Co.		Area Code				Monthly Pmt			
			& Phone #				\$		
					T				
Previous Residence Address City State Zip			Previous Landlord Area Code				How long?		
					& Phone #		Mthly Pmt.		
Have you ever been filed	d on for an evic	tion o	r foreclosure?	•	YES NO				
		EMP	LOYMENT H	ISTO	RY				
Applicant Employed By			Supervisor's Name				ow long?		
• •			•				yrs mths		
Address City	State Zi	n	Phone		Position Held/Occupati	on S	alary		
. Idai Coo	Suite Zi	r	1 110110		1 osmon Hela, Occupan	\$	per		
Previously Employed By			Supervisor's Nam	ne			ow long?		
1 Teviously Employed By			Supervisor 8 Ivalli	ic.					
A 11 C''	G	_	Dl		D4: H 11/0		yrs mths		
Address City	State Zi	p	Phone		Position Held/Occupati		alary		
						\$	per		
Co- Applicant Employed By		Supervisor's Name				ow long?			
				Г			yrs mths		
Address City	State Zi	p	Phone		Position Held/Occupati	on Sa	alary		
						\$	per		
ADDITIONAL INCOME: Addi	tional income such a	s child s	support, alimony, or	r separat	e maintenance. Source:	:			
Amount of \$	per								
	_								

## CREDIT AND LOAN REFERENCES

	CREDIT	AND LOA	N REFERE	NCES			_
No. of Vehicles		any recreation					1
On Property Auto No 1 - Type	vans, boats, n	so specify:	State				
Financed Through	Account No.		Monthly Payment				
	License						
Auto No 2 – Type	License		State				
Financed Through	Account No.			Monthly Payment			
Loans & Credit Card Accounts	Total Debt			Payments			
				\$ per \$ per			
				\$		per	
		BANK REFI					_
Name of Bank or Savings & Loan		Type of Account		Total Ba		Balance	
Family Physician (Optional In case of Emergency)	Address	City		State	Zip	Area Code & Phone #	_
In Case of Emergency, Call	Relationship	Address City		State Zip		Area Code & Phone #	_
Applicant hereby authorizes verifica	ntion of any and	d all inform	ation set fort	h on this	Applic	ation, including release	of
information by any bank or savings	and loan, empl	loyer (prese	nt and forme	r) and an	y Lend	er. All such information	
hereon, and released as authorized a	bove, will be k	kept confide	ntial. APPLI	CANT R	EPRES	SENTS THAT THE	
INFORMATION SET FORTH ON	THIS APPLIC	CATION IS	TRUE AND	COMPL	ETE. N	Material misrepresentation	ons c
the Application will constitute a def	ault under the	Lease or Re	ntal Agreem	ent betwe	en the	parties.	
Have you Applied for another Re	ntal & been de	enied	_Y/N?				
If Military, have you applied or in				Y/N?			
CREDIT CHECK & BACK GRO	UND CHECK	K CHARGI	E - Applican	t has subr	nitted t	he sum of \$	_ (\$5
per 18 yrs+ Occupant )which is non	refundable pay	ment for a	credit check	and proce	essing c	charge, receipt of which	is
acknowledged by Management. Suc	h sum is not a	rental paym	nent or depos	it amoun	t. In the	e event this application i	S
approved or disapproved, this sum v	vill be retained	by manage	ment to cove	er the cost	t of pro	ocessing application as	
furnished by applicant. This applica		•			•	0 11	
a sa		2 2 2 2 2 2 1 0 1 0	20 pr		,		
Annlicant's Signature		Co-	Annlicant's S	ionsture			
Applicant's Signature			applicant 5 5	ignature .			_