



For Office Use ONLY

APP FEE

Check #: _____ Date: _____

DAMAGE DEPOSIT

Check #: _____ Date: _____

LEASING APPLICATION

OWNER ACKNOWLEDGES AND UNDERSTANDS ALL COVENANTS, CONDITIONS & RESTRICTIONS:

- All assessments must be current at time of application.
 - No active violations are to be present on unit at time of application.
 - Screening Fee of \$100.00 per application (Please make check or money order payable to: **Access Realty**) **Additional fees will apply for more than 2 applicants.**
An additional \$500.00 maintenance deposit may be required for maintenance assisted properties.
 - Copy of signed lease must accompany this application as well as a copy of valid government issued photo ID for each applicant over the age of 18.
 - *Lease is voidable if not authorized and pursuant to terms of Declaration. Access Management will enforce voiding of lease if not authorized at the expense of the unit owner.*
 - Owner acknowledges that if applicable all transponders and/or key fobs for the property and amenities will be deactivated for the extent of the lease term.
- *Please contact us at: SWFcontactus@accessdifference.com or call 813-607-2220 with any questions regarding the application.**

Community Name: _____

Property Address: _____

Property Owner: _____

TENANT INFORMATION:

Full Name _____

Home Phone () _____ Work Phone () _____ Cell Phone () _____

Date of Birth _____ Social Security No. _____

Drivers License No. _____ State _____

Have you ever been arrested? Yes _____ No _____

If yes, when, where, why? _____

Co-Applicant Name _____

Co-Applicant Date of Birth _____ Co-Applicant Social Security No. _____

Co-Applicant Drivers License No. _____ State _____

Have you ever been arrested? Yes _____ No _____

If yes, when, where, why? _____

Email Addresses _____

Name and Ages of everyone who will live in the residence:

List all pets _____

Vehicle Make/Model _____ Year _____ Tag Number/State _____

Vehicle Make/Model _____ Year _____ Tag Number/State _____

EMPLOYMENT INFORMATION:

Applicants Employment Status _____ Full Time _____ Part Time _____ Student _____ Unemployed

Employer _____

Address _____

Job Title _____ Dates employed _____

PREVIOUS RESIDENTIAL HISTORY:

Current Address _____

Owner/Agent _____ Phone () _____

Reason for Leaving _____

CREDIT HISTORY:

Have you ever filed bankruptcy? Yes _____ No _____

Have you ever been evicted from a rental residence? Yes _____ No _____

Are you a party to any lawsuits? Yes _____ No _____

If you answered yes to any of the above questions, please explain

AUTHORIZATION

By my signature below, I represent that all of the information that I have disclosed in this Florida Rental Application is true, accurate, and complete. I acknowledge that all of the information I have disclosed is material and Management is relying on the information to decide whether to grant or deny this Application. I authorize Management and/or Association to order and review my credit and criminal history and investigate the accuracy of all information contained in this Rental Application. . I AGREE NO ADDITIONAL TENANTS WILL BE ALLOWED TO MOVE INTO THE UNIT THAT ARE NOT LISTED ON THIS APPLICATION. FAILURE TO PROVIDE TRUE AND ACCURATE INFORMATION MAY RESULT IN ASSOCIATION SEEKING EVICTION.

NAME _____ DATE _____

NAME _____ DATE _____