Rental Application – Ackley Florida Property Management **Property and Date** Property applied for Date of application **Applicant Information** First Jr./Sr./III Middle Last name Date of birth SSN Driver's Lic State Fmail address Cell phone Home phone Name(s) of any co-applicant, co-signor, or guarantor Co-applicant, co-signor, or guarantor's relation to Applicant: Spouse Roommate Parent Other (describe): Have you ever gone by any other name(s)? No If yes, what name(s)? Are you currently in the armed forces or reserves? Yes If yes, state rank, service and duty station: Residency History Current address Dates: From State Zip Rent or own? Rent Own Rent or Pmt \$ Landlord name Landlord phone Previous address Dates: From / To: City State Zip Rent or Pmt \$ Landlord name Rent or own? Rent Own Landlord phone Reason for leaving previous address Other Occupants List names of all persons under 18 who will occupy the unit. All applicants 18 or over must complete a separate application. Relationship Name Age SSN Name Relationship Age Name Age Relationship SSN Name Age Relationship SSN Name Relationship SSN Pets Do you have pets? No Email a photo of each pet to <u>accounting@ackleyflorida.com. Has</u> pet ever bitten or attacked anyone? Туре Weight Breed Breed Туре Weight lbs Туре Weight lbs Breed **Emergency Contact** Name of a family member not residing with you Relationship Phone Address City Zip Email Name of a person other than a family member not residing with you Relationship Phone Address City Zip Email **Employment Information** Current employer Employment dates: From То City State Employer address Zip Phone Position Monthly gross \$ Supervisor Previous employer Employment dates: From To Employer address State City Zip Phone Supervisor Position Monthly gross \$

Other Income (pe	r month)								
Alimony/Child Support	\$		Name and address of payor						
Social Security	\$		Description of benefits						
Retirement	\$		Name or source of payments						
Public Assistance	\$		Name of assistance program						
Other	\$		Describe						
Automobile									
Vehicle 1: Year			Make		Model				
Color License Tag		g State		County					
Vehicle 2: Year		Make		Model	el				
Color License Ta		J	State County						
Banking Reference									
Checking Account (Bank Na	•			Account Number					
Savings Account (Bank Nam	Account Number								
Mandatory Screen								1	
1. Have you ever been evicted or a defendant in an eviction action?								Yes	No
2. Is any previous landlord trying to collect money from you?							-	Yes	No
Have you ever filed or been discharged from a bankruptcy, or are you currently under a bankruptcy? Have you ever been convicted of any felony?								Yes Yes	No No
-		-	involving a sexual offense, stalking	assault hattery theft f	raud had chec	rks		162	INO
•			or illegal use or possession of wea	•	444, 544 6116	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Yes	No
6. Have you ever been asked to move because of a lease violation of any kind?								Yes	No
7. Are you unemployed?								Yes	No
8. Do you have legal right to be in the United States? Yes, I am a U.S. Citizen Yes, I have a valid visa No									
If you answered "yes" to a	ny question 1	through 7, de	scribe below:						
How did you hear about	cout us?: Showing Agents name & company:								
information provided Property Manageme current and past em and hold harmless A liability, claims and I information provided	I in making the and its ployment, ckley Flori awsuits with informatic informatic	g a decision contractor and contain da Proper ith regard ve. I author	olete and correct. I under in to accept, conditionally is to obtain my credit rep- act my current and past la by Management and any to the information provided orize Ackley Florida Prope ocation and employment	vaccept, or deny mort and criminal ba andlords to verify n parties who providued, regardless of the erty Management a	y rental apockground rental he informatione source and its cont	oplication. I a report, verify istory. I agre on to verify t and regardles ractors to obt	nuthomy in the total end to the total en	orize A income indem applica wheth a cons	ckley Flore and inify tion from her the sumer cre
Applicant's Signature Print Applicant's Full	Nama								