

## Rental Application

Property Location \_\_\_\_\_ Apt. # \_\_\_\_\_ Date: \_\_\_\_\_  
Number of Bedrooms \_\_\_\_\_ Maximum Number of Occupants \_\_\_\_\_ Date Available \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

### CONDITIONS OF OCCUPANCY

Lease Term \_\_\_\_\_ Monthly Rent \$ \_\_\_\_\_ Security Deposit \$ \_\_\_\_\_  
Date Rent Begins: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Prorated Rent \$ \_\_\_\_\_ Pet Fee \$500.00 per pet.

Utilities Paid By Renter: \_\_\_ Gas \_\_\_ Electric \_\_\_ Water \_\_\_ Sewer Other: \_\_\_\_\_  
Pets: \_\_\_ No \_\_\_ Yes \_\_\_ Negotiable Limitations: \_\_\_ Unfurnished \_\_\_ Furnished \_\_\_ Range \_\_\_  
Dishwasher \_\_\_ Refrigerator \_\_\_ Washer & Dryer

### BELOW TO BE COMPLETED BY APPLICANT

**Applicant & Co Applicants email address:** \_\_\_\_\_

**Applicant & Co Applicant direct cell phone #s** \_\_\_\_\_

**APPLICANT'S NAME:** \_\_\_\_\_  
First Middle Initial Last

Date of Birth \_\_\_/\_\_\_/\_\_\_ Soc. Sec. # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Marital Status:  Married  Single  Widowed  Sep  Div

**Present Address** \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Street City State Zip

Present Owner \_\_\_\_\_ Owner's Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Owners Address: \_\_\_\_\_ Rent Amt. \$ \_\_\_\_\_ Length of Occupancy \_\_\_\_\_

**Previous Address** \_\_\_\_\_ Owner's Phone #(\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Street City State Zip

Previous Owner \_\_\_\_\_ Owner's Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Owners Address: \_\_\_\_\_ Rent Amt. \$ \_\_\_\_\_ Length of Occupancy \_\_\_\_\_

**APPLICANTS PRESENT EMPLOYER** \_\_\_\_\_

EMPLOYER'S ADDRESS \_\_\_\_\_  
SUPERVISOR \_\_\_\_\_

POSITION \_\_\_\_\_ DEPT. # \_\_\_\_\_ PHONE #(\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ EXT. # \_\_\_\_\_

Present Monthly Income (gross) \$ \_\_\_\_\_ Length of Employment \_\_\_\_\_  Part time  Fulltime

**APPLICANTS PREVIOUS EMPLOYER** \_\_\_\_\_

EMPLOYER'S ADDRESS \_\_\_\_\_  
SUPERVISOR \_\_\_\_\_

POSITION \_\_\_\_\_ DEPT. # \_\_\_\_\_ PHONE #(\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Previous Monthly Income (gross) \$ \_\_\_\_\_ Length of Employment \_\_\_\_\_  Part time  Fulltime

**NAME OF CO-APPLICANT** \_\_\_\_\_ MAIDEN NAME \_\_\_\_\_

# Jacksonville Property Management Pros.com

Phone: 888-392-3525 Fax: 888-392-3525

DATE OF BIRTH \_\_\_/\_\_\_/\_\_\_ SOC. SEC. # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ MARITAL STATUS:  MARRIED  SINGLE  WIDOWED  SEP  DIV

**Present Address** \_\_\_\_\_ Phone (\_\_\_\_)\_\_\_\_-\_\_\_\_\_  
Street City State Zip

Present Owner \_\_\_\_\_ Owner's Phone (\_\_\_\_)\_\_\_\_-\_\_\_\_

Owners Address: \_\_\_\_\_ Rent Amt. \$ \_\_\_\_\_

Length of Occupancy \_\_\_\_\_

**Previous Address** \_\_\_\_\_ Owner's Phone #(\_\_\_\_)\_\_\_\_-\_\_\_\_\_  
Street City State Zip

Previous Owner \_\_\_\_\_ Owner's Phone (\_\_\_\_)\_\_\_\_-\_\_\_\_

Owners Address: \_\_\_\_\_ Rent Amt. \$ \_\_\_\_\_ Length of Occupancy \_\_\_\_\_

**Co - APPLICANTS PRESENT EMPLOYER** \_\_\_\_\_

EMPLOYER'S ADDRESS \_\_\_\_\_

SUPERVISOR \_\_\_\_\_

POSITION \_\_\_\_\_ DEPT. # \_\_\_\_\_ PHONE #(\_\_\_\_)\_\_\_\_-\_\_\_\_ EXT. # \_\_\_\_\_

Present Monthly Income (gross) \$ \_\_\_\_\_ Length of Employment \_\_\_\_\_  Part time  Fulltime

**APPLICANTS PREVIOUS EMPLOYER** \_\_\_\_\_

EMPLOYER'S ADDRESS \_\_\_\_\_

SUPERVISOR \_\_\_\_\_

POSITION \_\_\_\_\_ DEPT. # \_\_\_\_\_ PHONE #(\_\_\_\_)\_\_\_\_-\_\_\_\_

PREVIOUS MONTHLY INCOME (GROSS) \$ \_\_\_\_\_ LENGTH OF EMPLOYMENT \_\_\_\_\_  PART TIME  FULLTIME

VEHICLES (1) YEAR \_\_\_\_\_ MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ LICENSE # \_\_\_\_\_

(2) YEAR \_\_\_\_\_ MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ LICENSE # \_\_\_\_\_

CREDIT NAME \_\_\_\_\_ NAME \_\_\_\_\_

CARDS NAME \_\_\_\_\_ NAME \_\_\_\_\_

BANK BANK NAME \_\_\_\_\_ CHECKING ACCOUNT # \_\_\_\_\_

REFERENCES BANK NAME \_\_\_\_\_ SAVINGS ACCOUNT # \_\_\_\_\_

PERSONAL NAME \_\_\_\_\_ PHONE #(\_\_\_\_)\_\_\_\_-\_\_\_\_

REFERENCES ADDRESS \_\_\_\_\_

Name \_\_\_\_\_ Phone #(\_\_\_\_)\_\_\_\_-\_\_\_\_

ADDRESS \_\_\_\_\_

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TRADE NAME \_\_\_\_\_ PHONE #(\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

REFERENCES ADDRESS \_\_\_\_\_

Name \_\_\_\_\_ Phone #(\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

ADDRESS \_\_\_\_\_

EMERGENCY (LIST RELATIVE OR FRIEND)

NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ PHONE #(\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

ADDRESS \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone #(\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

ADDRESS \_\_\_\_\_

Have you ever filed bankruptcy?: \_\_\_\_\_ YES \_\_\_\_\_ NO

If yes, please explain:

Do you plan to file bankruptcy now, or in the next twelve months?

Have you ever been evicted? \_\_\_\_\_ YES \_\_\_\_\_ NO

Have you ever been convicted of a crime other than a minor traffic offense? \_\_\_\_\_ YES \_\_\_\_\_ NO

Do you have any pets? Y / N (See pet waiver/application) Detail:

Please list **any** additional occupants that will occupy premises ( including roommates)

\_\_\_\_\_ Relationship \_\_\_\_\_ Age \_\_\_\_\_

\_\_\_\_\_ Relationship \_\_\_\_\_ Age \_\_\_\_\_

\_\_\_\_\_ Relationship \_\_\_\_\_ Age \_\_\_\_\_

Application Taken By: \_\_\_\_\_ Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Fee Recorded \$ \_\_\_\_\_

Application:  Approved  Rejected  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Date Applicant Notified:

I hereby deposit with owner/agent, the sum equal to one months rent as a holding fee on the above premises pending execution of a lease agreement. I understand if this application is approved and I am unable to fulfill the conditions outlined in this application that my holding fee will be applied toward any rent loss, advertising costs, re-rental fees, etc. If this application is not approved, providing all the above questions are answered correctly and truthfully the fee shall be returned.

The undersigned does hereby consent that all information stated on this application may be verified and processed through a Credit Reporting Agency. This may include a credit and police report. I hereby release all parties from any liability in connection with the provision and use of such information. I understand that this application does not constitute any oral and/or written commitments on the part of the owner/agent.

A payment of \$75.00 is included herewith, which payment is made for the purpose of verifying the information included on this application. I understand this charge is not under any circumstance to be returned to me.

### AUTHORIZATION TO RELEASE INFORMATION

**I/We hereby authorize you to release any and all information that may be required for the purpose of a credit & background transaction.**

Thank you.

_____ (Signature)	_____/_____/_____ (Date)
_____-_____-_____ (Social Security Number)	
_____ (Signature)	_____/_____/_____ (Date)
_____-_____-_____ (Social Security Number)	
_____ (Signature)	_____/_____/_____ (Date)
_____-_____-_____ (Social Security Number)	
_____ (Print Name)	_____/_____/_____ (Birth Date)



Jacksonville Property Management Pros.com  
4600 Touchton Rd, Building 100 Suite 150  
Jacksonville, Fl 32246  
Toll Free Phone & Fax: 888-392-3525

## PET WAIVER

(Becomes a part of the Lease Agreement)

The Applicant(s) states that he/she does not intend to obtain and house a pet of any kind during the term of the lease while residing at:

Property Address:

Should the undersigned decide to obtain a pet, the undersigned agrees to obtain written permission from the Property Manager prior to obtaining a pet.

Applicant(s) further agrees that if he/she should obtain a pet without the written permission of the Property Manager, will pay a penalty of **\$500.00** plus normal monthly pet rent fee of **\$20.00** retroactive to the date of the lease signing, and also will pay the non-refundable Pet Fee of **\$500.00** for permission to house a pet (See Pet Application & Lease). The penalty, non-refundable fee retroactive rent shall become due and payable upon notification by the Property Manager.

Applicant has been advised of and understands the pet policy and pet restrictions of Real Estate & Property Management Pros.com.

Applicant/Resident	Date
Applicant/Resident	Date
Guarantor	Date

## PET APPLICATION

(Becomes a part of the Lease Agreement)

This is an application to house a pet. It is NOT permission to house a pet until the Property Manager has given his approval. Only the following described pet is authorized to be kept in the resident's apartment/house. No substitutions are allowed. No other pet shall be on the premises by residents or resident's guests and/or visitors, or occupants.

**CERTAIN RESTRICTIONS APPLY FOR DOGS AND CATS. NO OTHER MAMMALS, REPTILES, RODENTS AND/OR INSECTS WILL BE ALLOWED.**

Resident's Name:	Home Phone:
Resident's Address:	
Name of Pet:	Photo Attached:
Type of Pet:	Breed:                      Color:
Weight :	Height:                      Housebroken:
Spade/Neutered:	Declawed:                      Age:
Copy of License & Record of Immunization Attached	

Applicant hereby pays a Non-refundable Pet Fee of \$500.00 for permission to house the above pet. This Non-refundable Pet Fee will not be used for damages, defleaing, deodorizing, and/or shampooing the carpets. Applicant agrees to pay \$20.00 per month as rent for housing of pet. Rent and Non-refundable Pet Fee must accompany this application.

Applicant/Resident	Date
Applicant/Resident	Date
Guarantor	Date
Approved/Date	Declined/Date

**PropertyManagementPros.com LLC**

**CREDIT CARD PAYMENT FORM**

**To pay by credit card, fill out the form below.**

Credit or Debit type (circle one)                      **Visa**                      **Mastercard**

Name as it appears on the Card: \_\_\_\_\_  
Home address \_\_\_\_\_  
City State \_\_\_\_\_  
Zip code \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Security Code (3-4 digit # on back of the card): \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Rental Application Fee: \$75 Yes: \_\_\_\_\_ or Not Applicable: \_\_\_\_\_

Other Amount to be Charged: \_\_\_\_\_ + \$3% Convenience Fee

Total Amount to Charged: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**By completing and signing this form, I understand that I am agreeing to and will be responsible for the charges listed above.**

Jacksonville Property Management Pros.com  
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