



Rental Application

Date of Application: _____ Desired Lease Start Date: _____

Property Address Applying For: _____

A **non-refundable** application fee is required for all applicants/occupants over the age of 18. Fees are as stated: FL residents \$70.00 per adult; Non-Florida residents \$_____ (Non- FL residents' application fee requires extra fees for background and eviction checks.)

A LEDGABLE COPY OF YOUR DRIVERS LICENSE MUST ACCOMPANY THIS APPLICATION

(1) _____
First Middle Last

Date of Birth Social Security Number

(2) _____
First Middle Last

Date of Birth Social Security Number

NAMES OF ALL OCCUPANTS UNDER 18 YEARS OF AGE:

First Last DOB Relationship

First Last DOB Relationship

First Last DOB Relationship

First Last DOB Relationship

CURRENT ADDRESS:

Number and Street City State Zip

How long did you lived there? Monthly Rent Amount Name of Rental Agent/Apt/Mortgage Company

Why did you leave? Telephone Number

EMPLOYMENT OF ALL ADULTS

Current Employer: _____ How Long? _____

Business Address: _____ Phone: _____

Position: _____ Salary _____ per _____

Current Employer: _____ How Long? _____

Business Address: _____ Phone: _____

Position: _____ Salary _____ per _____

Number of vehicles that will be kept at property: _____ . List each vehicle below.

Make: _____ Year: _____ Color: _____ Plate: _____

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Make: _____ Year: _____ Color: _____ Plate: _____

Are you a pet owner? No Yes

If so, what Type: _____ Breed: _____ Weight: _____

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No animal of any kind shall be permitted in the premises without prior consent of the landlord or landlord’s agent. If allowed, a non-refundable pet fee (per pet) must be completed and submitted along with a photo of the pet (s).

Do you have renter’s insurance? No Yes Company & Policy Number: _____

Have you ever had eviction proceedings against you? No Yes

Have you ever been convicted of a felony? No Yes

IMPORTANT TO APPLICANTS

(1) The lease effective date is final. If the applicant fails to move in on that date, prorated rent still is charged from the lease effective date.

(2) A full month’s rent will be due at move-in. Any applicable prorated rent will be due on the first day of the following month. Except, if the move-in occurs on the 20th or later, prorated rent and the full month’s rent will be due upon move-in.

QUALIFICATION STANDARDS

Income Requirements: Employment and income will be verified on each applicant. Monthly income must equal at least three times the monthly rental rate to be considered for this/any property.

Rental Reference: Two years of rental history will be verified on each applicant. Applicant must have been on the lease or a mortgage holder for the reference to be valid. References should reflect the applicant’s ability and willingness to pay.

Credit Qualifications: Credit Information on each applicant will be obtained through a national credit reporting agency. Credit history should positively reflect the applicant’s ability and willingness to make payments as required by the lease or mortgage.

APPLICANTS SIGNATURE

I certify that the foregoing information is true and complete to the best of my knowledge. I authorize inquiries to be made to verify the statements above, including credit bureau reports.

(1) _____

Contact Number: _____ Email: _____

(2) _____

Contact Number: _____ Email: _____



Rental Requirements

Please Read Carefully!

1. All tenants over the age of 18 must fill out an application. Application fee is **\$70.00 per adult and is non-refundable.**
2. Tenants must have a combined income for three times the monthly rent. If you do not provide your own income a guarantor will be needed.
3. Self-employed tenants must provide income documentation such as tax returns for the last (2) two years.
4. Tenants with felonies and prior convictions will not be approved. Sexual and weapon possession offenses will also be declined.
5. Tenants must have verifiable rental and or mortgage history as well as employment history for the last two years.
6. Security deposits are in the amount of a minimum of one month's rent or more. The security deposit is refundable upon the lease expiration except for a minimum of **\$250.00** of the deposit, which is non-refundable as a professional cleaning fee. There is also a minimum of **\$250.00** professional carpet cleaning fee that will be deducted.
7. ALL monthly rent payments can be paid with Personal Checks, Direct Deposit, Cashier's Check or Money Order to be made out to **Selective Property Management, LLC**. Cash is not accepted. Tenants may pay online with Credit Card at www.Paylease.com. Ask management for more details. **ALL RENT PAYMENTS MUST BE SENT TO 12001 Research Parkway, Suite 236 ORLANDO, FL 32826**
8. No post-dated checks are accepted for rent.
9. Rental property will be taken off the market once a non-refundable holding deposit equivalent to (1) one month's rent is collected.
10. No rental property will be held without a holding deposit for more than (2) two weeks without authorization.
11. If applicant is approved, but fails to enter into the lease within 3 days of verbal and/or written approval and/or does not take possession after lease signing, the FULL "HOLDING DEPOSIT" shall be forfeited to the Landlord and RentWorks in addition to any penalties as provided in the lease if the lease has been signed by the applicant.
12. All properties are accepted in "AS-IS" condition.
13. Late fees of (5%) percent of the monthly rent apply after the 4th of every month plus a late fee of \$10.00 per a day the rent is late.
14. The office is open Monday- Friday 9:00am – 5:00pm. Hours are subject to change (i.e. holidays, emergencies, etc...) Please check with office if you are unsure. Rent payments will **ONLY** be accepted between the hours of operations. **NO EXCEPTIONS**. You must ask to receive a receipt at the time of paying rent check in the office, otherwise, the rent check will be considered late because of no proof of when we received it.

Tenant Signature: _____ Date: _____

Tenant Signature: _____ Date: _____



Rental Verification

Top Portion to be filled out by Tenant ONLY

Resident Name: _____

Resident Address: _____

I authorize this inquiry: _____

Resident Signature

Landlord Contact is essential to verify this information. Please include FAX or EMAIL to send this document

Landlord Contact: _____ Phone: _____

Fax: _____ Email: _____

Present and/or Past Residence Verification to be Completed by Previous Landlord

*This section is to be filled out by previous/current landlord **ONLY**. Selective Realty Group, LLC will contact the landlord to verify and fill out.*

Date of move in: _____ Date of move out: _____

Rental Amount: \$ _____ Deposit Amount: \$ _____ Lease Term: _____

Any Late Payments: _____ Any NSF'S: No Yes If Yes, How Many? _____

Roommates: No Yes If Yes, How Many? _____ Their Names: _____

Any lease violations (Noise, Etc.) No Yes If Yes, Please explain: _____

Is property in good condition: No Yes If Yes, Please explain: _____

Would you re-rent to this individual? _____ Explain: _____

Completed By: _____ Date: _____

Company: _____ Position: _____

Comments: _____

PLEASE FAX COMPLETED FORM TO: Selective Realty Group, 407-207-8837 OR EMAIL: shanonl@selectiverealtygroup.com



Employment Verification

Top Portion to be filled out by Tenant ONLY

Employee Name: _____ Date: _____

Company: _____

Address: _____

Employer contact is essential to verify this information. Please include FAX or EMAIL to send this document

Phone Number: _____ Fax Number: _____

I authorize this inquiry: _____

Resident Signature

Current Employer Verification to be completed by Employer ONLY

This section is to be filled out by the Employer ONLY. Selective Realty Group, LLC will contact the landlord to verify and fill out.

Dates of Employment: _____ Salary: _____ Per _____

Is the employee on a leave of absence? No Yes If Yes, Please Explain: _____

Signature: _____

Printed Name: _____

Position in Firm: _____ Date: _____

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