Print Form

***Application for Ellison Property Management***

Phone: 352-351-0055 Fax: 352-351-4465

Unmarried Co-applicants **Fill Out A Separate** Application. Do not leave any **Blank spaces.**

***<u>Please PRINT in black ink</u>***

Name: _____ SS# _____/_____/_____ DOB_____/_____/_____
Last First MI (Jr. /Sr./Prior)

Spouse: _____ SS# _____/_____/_____ DOB_____/_____/_____
Last First MI (Jr. /Sr./Prior)

Drivers License # _____ State _____

Spouse's Drivers License # _____ State _____

Other: _____/____/_____ _____/____/_____
Name Relationship Age SS# Name Relationship Age SS#

Occupants: _____/____/_____ _____/____/_____
Name Relationship Age SS# Name Relationship Age SS#

PETS: Number: ____ Type: _____ Breed: _____ Weight: _____ Age: _____

Home Phone: (____) _____-_____ Why Moving? _____

Present Address _____
Street Apt# City State Zip Code

Present Landlord/
Mortgage Holder _____ Phone: (____) _____-_____

Length of Residence: _____/_____ to _____/_____
Month Year Month Year

Monthly Rent/Mortgage $_____ Mortgage Acct# _____

Previous Address _____
Street Apt# City State Zip Code

Previous Landlord/
Mortgage Holder _____ Phone: (____) _____-_____

Length of Residence: _____/_____ to _____/_____
Month Year Month Year

Monthly Rent/Mortgage $_____ Mortgage Acct# _____

Present Employer_____ City & State _____ Phone: (____) _____-_____

Position _____ Dates Employed _____/_____ To _____/_____
Month Year Month Year

Income _____ Per _____ Manager _____

Previous Employer_____ City & State _____ Phone: (____) _____-_____

Position _____ Dates Employed _____/_____ To _____/_____
Month Year Month Year

Spouse Present
Employer_____ City & State _____ Phone: (____) _____-_____

Position _____ Dates Employed _____/_____ To _____/_____
Month Year Month Year

In Case of
Emergency Notify: _____ (____) _____
Name Relationship Phone

Have you ever had an Eviction filed or left owing money to an owner or landlord?

Applicant Yes ____No ____ Spouse Yes ____No____

Have you applied for residency in the past 2 years but did not move in?

Applicant Yes ____No____ Spouse Yes ____No____

Have you or any occupants ever been convicted of, or arrested for, put on probation for, or had an adjudication withheld or deferred for a felony offense?

Applicant Yes ____No____ Spouse Yes ____No____

***If you have answered yes to any of the above questions please explain on the back of this sheet the circumstances regarding the situation.***

Vehicles: Year, Make/Model and tag numbers: _____

**AUTHORIZATION OF RELEASE OF INFORMATION**
Applicant(s) represent that all of the above information and statements on the application for rental are true and complete, and hereby authorize an investigative consumer report including, but not limited to, residential history (rental or mortgage), employment history, criminal history records, court records and credit records. This application must be signed before it can be processed by management. Applicant agrees that false, misleading or misrepresented information may result in the application being rejected, will void a lease/rental agreement if any/or be grounds for immediate eviction with loss of all deposits and any other penalties as provided by the lease terms, if any.
**NON-REFUNDABLE APPLICATION FEE –** Applicant(s) agree to pay $25.00 for non-refundable application fee.
**GOOD FAITH DEPOSIT -** Applicant(s) has paid a "good faith deposit" of $_____ in consideration of taking the dwelling unit off the market while considering the approval of this application.
If applicant(s) is approved and the contemplated lease is entered into, then on the day of move in the good faith deposit will be credit towards payment of the security deposit amount of $_____.
If the applicant(s) is approved but fails to promptly enter into the contemplated lease or fails to move in on the agreement date, the good faith deposit will be retained by owner as liquidated damages. The good faith deposit will only be refunded if the applicant(s) cancel this application with written notice within 24 hours, or if application is not approved: refunds will be sent within 15 days of cancellation this application preliminary only and does not obligate owner or owner's agent to execute a lease or deliver possession of the proposed premises. No oral agreements have been made.

_____ ____/____/____ _____ ____/____/____
Applicant's Signature Date Applicant's Signature Date

***ASAP APPLICANT SCREENING AND PROCESSING***