

APPLICATION AND OFFER TO RENT/LEASE REAL PROPERTY

DIGIOVANNI PROPERTIES
 Property Manager 321-400-9500
 FAX: 415-487-1900
 Email: Manager@rent6.com

INSTRUCTIONS: Print with BLACK ink. Each adult on the lease must fill out a separate application and pay a background check fee except a married couple. **WARNING:** Lying, misleading, or omitting pertinent information will cause rejection or a high security deposit – applications are screened carefully.

Application Date / /

THE RENTAL PROPERTY

ADDRESS 7705 SIMON RIDGE CT		
CITY Kissimmee	STATE FL	ZIP 34747
RENTAL RATE: \$	SECURITY DEP \$	DESIRED MOVE-IN DATE: / /
Utilities not included (Gas, Water, Trash, Electricity, Telephone)		

APPLICANT'S PERSONAL DATE

FULL NAME: FIRST, MIDDLE, LAST	LIST OTHER NAMES YOU'RE KNOWN BY

SOCIAL SECURITY	BIRTH DATE	DRIVER'S LICENSE	STATE

HOME PHONE	CELL PHONE	WORK PHONE	FAX

EMAIL ADDRESS:

OTHER PERSONS TO OCCUPY PROPERTY (Social Security and birth date needed for spouse or significant other only)

FULL NAME	RELATIONSHIP TO APPLICANT	AGE	SOCIAL SECURITY	BIRTH DATE
Adult:				
Adult:				
Child:				
Child:				
Child:				
Child:				

1. RESIDENCE HISTORY

ADDRESSES WHERE YOU LIVE AND HAVE LIVED AT			DATES MOVED	RENT PAID	OWNER/MANAGER NAME/PHONE NUMBERS	REASON FOR LEAVING
STREET (Current residence)			IN		NAME	
CITY	ST	ZIP	OUT		PHONE	
STREET (Previous Residence)			IN		NAME	
CITY	ST	ZIP	OUT		PHONE	
STREET (Previous Residence)			IN		NAME	
CITY	ST	ZIP	OUT		PHONE	

2. EMPLOYMENT HISTORY

COMPANY NAME	ADDRESS CITY, ST, ZIP	POSITION	START DATE	SUPERVISOR TELEPHONE	SALARY WAGE
PRESENT					
PREVIOUS					
PREVIOUS					

3. BANKING INFORMATION

BANK NAME	LOCATION	CHECKING OR SAVINGS	PRESENT BALANCE

4. PERSONAL REFERENCES

NAMES	ADDRESSES	TELEPHONE	HOW LONG ACQUAINTED
	STREET		
	CITY ST ZIP		
	STREET		
	CITY ST ZIP		

5. IN CASE OF EMERGENCY – NOTIFY person not living with you

NAME	RELATIONSHIP	ADDRESS	TELEPHONE
		STREET	
		CITY ST ZIP	
		STREET	
		CITY ST ZIP	

8. AUTOMOBILES

YEAR	MAKE	MODEL	COLOR

	YES	NO
9. HAS ANY CIVIL JUDGEMENT BEEN ENTERED AGAINST YOU FOR THE COLLECTION OF DEBT IN THE PAST 7 YEARS?		
10. ARE YOU OR ANYONE IN YOUR HOUSEHOLD A CIGARETTE OR CIGAR SMOKER?		
11. DO YOU HAVE ANY PETS OR INTEND TO GET ANY PETS? Pet Name, Breed, & Weight of each pet and submit a picture.		
12. HAVE YOU OR ANYONE IN YOUR HOUSEHOLD EVER BEEN ARRESTED FOR A FELONY, DRUG POSSESSION, or DOMESTIC VIOLENCE?		
13. HAVE YOU EVER BEEN EVICTED OR HAVE REFUSED TO PAY RENT FOR ANY REASON?		
14. HAVE YOU OR DO YOU INTEND TO POSSESS, SELL, OR USE ILLICIT DRUG OR NARCOTICS IN YOUR RESIDENCE?		
15. HAVE YOU RENTED FROM DIGIOVANNI PROPERTIES IN THE PAST?		
16. ARE YOU IN SCHOOL OR MILITARY? If yes, STATE THE COURSE OF STUDIES OR MILITARY RANK.		
17. IF ANY QUESTION 9 THROUGH 16 IS ANSWERED "YES", PLEASE EXPLAIN FULLY:		
18. HOW DID YOU HEAR OF THE VACANCY?		
19. HOW LONG DO YOU EXPECT TO STAY IN THIS PROPERTY?		

