

Summer Brooke Townhomes

APPLICATION FOR LEASE

PERSONAL INFORMATION TENANT (1): **Email:** _____

Name: (F) (M) First: _____ Middle: _____ Last: _____

Social Security Number: _____ Date of Birth: _____

Driver's License Number: _____ State: _____

Phone: (____) _____ Cell Phone: (____) _____

Current Address: _____ City: _____

State: _____ Zip: _____ Landlord Name: _____

How Long: _____ Phone: (____) _____ Current Monthly Rent/Mortgage amount: \$ _____

Previous Address: _____ City: _____

State: _____ Zip: _____ Landlord Name: _____

How Long: _____ Phone: (____) _____ Previous Monthly Rent/Mortgage amount: \$ _____

Current Employer: _____ Position: _____ Years: _____

Address: _____ City: _____ State: _____ Zip: _____

Contact: _____ Phone: (____) _____ Weekly Gross Earnings: \$ _____

Previous Employer: _____ Position: _____ Years: _____

Address: _____ City: _____ State: _____ Zip: _____

Contact: _____ Phone: (____) _____

PERSONAL INFORMATION TENANT (2): **Email:** _____

Name: (F) (M) First: _____ Middle: _____ Last: _____

Social Security Number: _____ Date of Birth: _____

Driver's License Number: _____ State: _____

Phone: (____) _____ Cell Phone: (____) _____

Current Address: _____ City: _____

State: _____ Zip: _____ Landlord Name: _____

How Long: _____ Phone: (____) _____ Current Monthly Rent/Mortgage amount: \$ _____

Previous Address: _____ City: _____

State: _____ Zip: _____ Landlord Name: _____

How Long: _____ Phone: (____) _____ Previous Monthly Rent/Mortgage amount: \$ _____

Current Employer: _____ Position: _____ Years: _____

Address: _____ City: _____ State: _____ Zip: _____

Contact: _____ Phone: (____) _____ Weekly Gross Earnings: \$ _____

Previous Employer: _____ Position: _____ Years: _____

Address: _____ City: _____ State: _____ Zip: _____

Contact: _____ Phone: (____) _____

How many people will occupy this residence? _____ Adult(s) _____ Child(ren) (List children on next line)

Name _____ Age _____ Name _____ Age _____ Name _____ Age _____

Do you have pets? Yes _____ No _____ (If Yes, Describe: _____)

In case of emergency, notify: _____ Relationship: _____ Phone: () _____
Address: _____ City: _____ State: _____ Zip: _____
Vehicle(s): (1) _____ Year: _____ License #: _____
(2) _____ Year: _____ License #: _____

I represent to you that I have read this entire application and that all of the above information is true and correct. I further represent that my rental and credit records are in good standing with no judgments or liens against me. If any of the above information is false, I hereby agree that my entire deposit may be forfeited to you. I agree that if I am accepted and fail to complete this transaction by signing your lease, my entire deposit will be forfeited to you. I understand that this application is subject to your approval, and if my application is not accepted, my deposit will be returned in full. I understand that my \$38.00 credit check fee is non-refundable. I also understand that this is not a lease and should my application be accepted, I agree to sign your lease form currently in use. If for any reason whatsoever you are unable to make the unit which is the subject of this application available at the beginning of the lease term, I hereby waive any and all rights to seek to recover any of the damages whatsoever against you, including without limitation, actual, punitive, or consequential damages. It is our policy not to discriminate rentals on the basis of race, creed, color, national origin, religion, age, or sex.

Applicant #1

Date

Applicant #2

Date

Summer Brooke Townhomes, 4798 S Florida Ave #405, Lakeland FL 33813
Phone (863) 860-8230 ~ Fax (863) 648-9077
Email office@summerbrooketownhomes.com