DAYTONA PROPERTY MANAGEMENT APPLICATION FOR RESIDENCY

Phone: (386) 248-3915

428 N Peninsula Dr. Daytona Beach, FL 32118

Each applicant must fill out a separate Application for Residency form.

APPLICANT #1	PRESENT ADDRESS
NameLast First MI Suffix Prior	Address
	Street Apt.#
SS#/DOB/	City State Zip
Home Phone # Cell Phone #	
E-mail Address	Mortgage Holder/Landlord Phone Number
Drivers License #State	Length of Residence/to/
Present Employer	Monthly Rent/Mortgage \$ Mortgage Acct#
Name	
City State Phone #	PREVIOUS ADDRESS
Income \$ Per	Address Apt.#
Position	
Employed//to// Supervisor	City State Zip
Previous EmployerName	
	Vehicle Info (1) Vehicle Info (2)
City State Phone #	
Position Income \$Per	Vehicle Info (3) Vehicle Info (4)
Employer/to/ Supervisor	
PROPERTY SEEKING TO LEASE	PETS
Address	NumberTypeBreedWeightAge
EMERGENCY CONTACT INFORMATION	NumberTypeBreedWeightAge
NamePhone#Relationship	ADDITIONAL OCCUPANTS
Address - Street, City, State, Zip	Name Relationship/Age SS#
If you responded "YES" to any of the below questions, please provide an explanation here:	Name Relationship/Age SS#
	Name Relationship/Age SS#
	OTHER INCOME
	SPerSource
Is there anything additional you would like to explain or inform us about?	For Emergency
	Name Relationship
	()
	Address Phone
	Do you intend to run any businesses from this property? Yes No If yes, please describe the business(es), including the business name(s) here:
How did you learn about us?	
Have you ever left owing money to landlord/owner? Yes No	Have you ever been sued for bills? Yes No
Have you been arrested or convicted of a felony? Yes No Have you applied for residency in the past 2 years,	Have you ever been bankrupt? Yes No
but did not move in? Yes No	Have you ever broken a lease? YesNo
Have you ever been evicted? Yes No	Is the total move-in amount available? Yes No Are you a smoker? Yes No
* If the answer to any of these questions is "YES," then please provide an	Are you a smoker? YesNo
explanation in the space provided above.	

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NON-REFUNDABLE APPLICATION FEE

Applicant agrees to pay \$50.00 for each adult for a non-refundable application processing fee. Acceptable forms of payment: Cash, Cashier's Check or Money Order payable to Daytona Property Management. NO PERSONAL CHECKS ACCEPTED.

RENTAL DEPOSIT AGREEMENT

Applicant has deposited a "RENTAL DEPOSIT" of \$500.00 in consideration for taking the dwelling unit, home, apartment, condo or commercial suite off the market while the application is being processed. If applicant is approved by Landlord and/or Management and the lease is entered into and possession of the rental unit is taken the "RENTAL DEPOSIT" shall be applied toward the SECURITY DEPOSIT. If applicant is approved, but fails to enter into the lease within 3 days of verbal and/or written approval and/or take possession after lease signing, the FULL "RENTAL DEPOSIT" shall be forfeited to the Landlord or Management in addition to any penalties as provided in the lease if the lease has been signed by the applicant. The "RENTAL DEPOSIT" shall be refunded only if applicant is not approved. Keys will be furnished only after lease and other rental documents have been properly executed by all parties and only after applicable rentals and security deposits have been paid. This application is preliminary only, in no way implies that a particular rental unit shall be available and in no way obligates Landlord or Management to execute a lease or deliver possession of the proposed premises.

ACKNOWLEDGEMENT AND SIGNATURE

Applicant represents that all of the above information and statements on the Application for Residency are true and correct. Applicant hereby authorizes verification of any and all information relating to residential history (rental or mortgage), employment history, criminal history and any and all records including, but not limited to, court records and credit records. Applicant acknowledges that this is an application for a dwelling unit, home, apartment, condo or commercial suite and does not constitute a rental or lease agreement in whole or part. Applicant further acknowledges that false or omitted information herein may constitute grounds for rejection of this application.

Applicant Signature	Date
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Applicant Name	