Meadow View Apartments

1600 Vick Road, Apopka, FL 32712 Phone: 352-272-9007 / email: MeadowView1600@gmail.com Website: MeadowViewApartments.net **Rental and Credit Application**

Personal Information

Date	Interviewed by			
Name of Applicant	Date of Birth			
E-mail	Telephone No.			
Social Sec. No.	Driver's License No.			
Present Address State	Zin			
Prior Address State	Zin			
How long have you lived at present address?				
How long did you live at prior address?				
Prior Landlord	Telephone No			
How many will be living in this unit? Adults _ Pets _	Children Weight of Pets			
Employer				
Current Salary				
How long?Contact Person Telephone No				
Spouse Information				
Name of Spouse Telephone No	Date of Birth			
Social Sec. No.	Driver's License No			

How long?			
T N	Contact Person	1	
Telephone No.			
Personal/Credit References			
Name	Relationship		Telephone No.
Credit References	Address		Telephone No.
Other Information			
Number of vehicles (including co	ompany vehicles)		
Make/Model		Year	
Make/Model Color	Tag No.	Year	State
Color	Tag No		State
Color Make/Model	Tag No		
Color	Tag No		State State
Color	Tag No		
Color Make/Model Color	Tag No Tag No	Year	State
Color Make/Model Color Make/Model Color	Tag No Tag No	Year Year	State
Color Make/Model Color Make/Model	Tag No Tag No Tag No	Year Year	State
Color Make/Model Color Make/Model Color Have You Ever:	Tag No Tag No Tag No 5 No If yes, v	Year Year when?	State

How were you referred to u Realtor (name)	us? Nev	wspaper	_ Drive Other	by On Line	2
Rental unit applied for	. <u></u>				
Commencement date		Term		Rent/Month	

Consent to Obtain Credit/Employment Information

I/We authorize **Meadow View Apartments** to investigate my/our credit qualifications and hereby release, in any manner, all of the information obtained by you. I/We further release all persons, agencies, or firms from any liabilities resulting from providing such information.

I/We declare under penalty of perjury that the information listed in this application is true and correct.

Executed on this _____ day of _____, 20__, in the city of _____, state of _____

Applicant's SignatureDateCo-Applicant's SignatureDate

The undersigned authorizes landlord, leasing agent, and representatives of owner/landlord to contact the undersigned's current or previous landlord, and current employer, and further, by a copy of this Application, authorizes any said landlord or employer to release pertinent residential and employment history information to be used in evaluating my lease application. I further authorize owner/landlord, leasing agent or its representatives to apply for or obtain an investigation or credit report in connection with this application. I understand that said investigation or credit report may contain information obtained from various state governmental and private entities relative to the undersigned's number of children, employment, occupation, general health, financial and criminal history information.

For Office Use Only–Do Not Write Below

Applicat	tion Verification	Person Contacted	Remarks
Prese	nt Landlord		
Previc	ous Landlord		
Applic Emplo	ant's pyment		
	oplicant's oyment		
Bank	-		
Refere	ence (1)		
Refere	ence (2)		
Refere	ence (3)		
Other	-		
Driver	's License/ID		
Credit	Bureau		
Verificatio	on completed by:		
Date:			
Remarks:			
Monies R	Received		
Date	Description	Amount	
	Security Deposi	t	
	Pet Deposit		
	1		

THIS APPLICATION: _ Is Approved _

_ Is Not Approved

Special Notes: