

Carrerou Enterprises, LLC./ Leah Carrerou

1136 1st St. So. Winter Haven, FL 33880
(863) 294-2384 Fax (863) 297-9781

email: lori@arearealestate.com

APPLICATION PROCESS

1. Applicant must sign and complete entire application. Please include a copy of the following:
 - Driver's License
 - Copy of Income (check stubs preferred)
2. A credit check will be performed on each applicant (s). The credit check fee is \$50.00(dollars) for each applicant. The fee is not refundable. Payment must be in the form of cash or money order. Applicant will be notified of status.
3. Move in deposit consists of \$_____ (security) + \$_____ (first month).

Please note that move in deposit must be in the form of a **Money Order or Cashier Check** only (no personal checks accepted) payable to Leah Carrerou.

4. **PET POLICY:** *NO PETS ALLOWED UNLESS AUTHORIZED*
*Depending on the pet, a non-refundable pet deposit of \$250 will be required.
Type of Pet:_____ Size (in pounds)_____
Is this a "service pet"? _____
Is this animal trained to perform tasks for disability? Yes or No
If Yes, please provide written and signed order from licensed physician stating the disability and requirement of service animal.
5. Fax application to 863-297-9781, email to *peter@arearealestate.com* or deliver to the above location for application process.

Thank you for your interest in our properties. If you have any questions, please contact our Property Manager at 863-294-2384.

APPLICATIONS QUALIFICATIONS STANDARDS

- INCOME:** Applicants must provide the ability to pay the monthly rental obligation.
- CREDIT:** Applicants must have good credit rating, with no outstanding judgments or collections.
- EMPLOYMENT:** Applicants must have a current job. Proof of employment and income verification will be required.
- RESIDENCY:** Applicant(s) must have a verifiable rental and / or Mortgage reference with a good payment record and **no history of foreclosure or eviction.**
- PAYMENTS:** All payments before move-in must be made by money order or cashier's check only.

**IF YOU HAVE ANY QUESTIONS PLEASE CONTACT OUR
PROPERTY MANAGER AT (863) 294-2384.**

Thank you for visiting our community!!

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Rental Application

APPLICATION REQUIRED TO BE COMPLETED FROM EACH APPLICANT AGE 18 OR OLDER

THIS SECTION TO BE COMPLETED BY LEAH CARREROU

Address of Property to be Rented: _____

Rental Term:

Lease from _____ to _____

Amounts Due Prior to Occupancy:

First month's rent	\$ _____
Last month's rent	\$ _____
Security Deposit	\$ _____
Credit check fee	\$ _____
Non-refundable pet deposit	\$ _____
TOTAL	\$ _____

To be completed by Applicant(s):

Applicant #1 Full Name: _____

Home Ph: () _____ Work Ph: () _____ Other Ph: () _____

Social Security Number: _____ - _____ - _____ Date of Birth: _____

Driver's License Number/State: _____ Exp. Date: ____/____/____

Applicant #2 Full Name: _____

Home Ph: () _____ Work Ph: () _____ Other Ph: () _____

Social Security Number: _____ - _____ - _____ Date of Birth: _____

Driver's License Number/State: _____ Exp. Date: ____/____/____

Vehicle (1) Make: _____ Vehicle (2) Make: _____ Vehicle (3) Make: _____

Model: _____ Model: _____ Model: _____

Color: _____ Color: _____ Color: _____

Year: _____ Year: _____ Year: _____

Tag # / State: _____ Tag # / State: _____ Tag # / State: _____

Additional Occupants

List everyone, including children, who will live with you:

Full Name: _____ Relationship to Applicant: _____ Age: _____

Rental History

Current Address: _____
Dates Lived at Address: From _____ To: _____ Rent Amount \$ _____
Reason for leaving: _____
Landlord/Manager Name: _____
Landlord/Manager's Phone: _____ Other #: _____

Employment/Income History (Applicant #1)

Name of Current Employer or Main Income: _____
Address: _____
Phone #:() _____ Name of Supervisor: _____
Supervisor's Phone: () _____
Dates Employed at This Job: From ___/___/___ To: ___/___/___
Position or Title: _____
Please list ALL other forms of income: _____
Monthly Gross Income: _____

Employment/Income History (Applicant #2)

Name of Current Employer or Main Income: _____
Address: _____
Phone #:() _____ Name of Supervisor: _____
Supervisor's Phone: () _____
Dates Employed at This Job: From ___/___/___ To: ___/___/___
Position or Title: _____
Please list ALL other forms of income: _____
Monthly Gross Income: _____

In case of emergency (nearest relative not living with you):

#1 Name _____ Relationship: _____
Address _____
Phone _____
#2 Name _____ Relationship: _____
Address _____
Phone _____

RELEASE OF INFORMATION AND AUTHORIZATION FOR VERIFICATION OF APPLICATION

Applicant represents that all statements information on the application for rental are true and complete, and hereby authorized an investigative consumer report and verification of any and all information relating to residential history (rental or mortgage), employment history, criminal history records, court records, and credit records. Applicant acknowledges that false or omitted information herein may constitute grounds for rejection of this application. Termination of occupancy, and/or forfeiture of fees or deposits and may constitute a criminal offense under the laws of this State. I hereby release Carrerou Enterprises, LLC from any liability and responsibility arising from their doing so. Facsimiles of this authorization may be used to facilitate multiple inquiries. In the event you receive a facsimile of this authorization, it should be treated as an original and the requested information should be released to facilitate my application for residency.

Applicant # 1 Signature Date

Applicant # 2 Signature Date

Print Name

Print Name