## Reilly Realty & Management Corporation

## Application for Rental



PO Box 4480 Winter Park FL 32793-4480 Phone: (407)658-1119 Fax: (407)671-4153

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RRMC Rental Application

Type:	Size:	Furnished:	_Rent:	Sec:	Pet:
Property Address:			City:		_Zip:
Name of Applicant:			Birth Date:		_Married:
Social Security #:		Driver's	s License #:		
Name of Spouse:_			Birth Date:		_No. of Children:
Social Security #:		Driver's	s License #:		
Names of Children	n (boy/girl):				
Other occupants (	No. and relationship):				
Pets (No. and bree	ed):				
Present Address:_				How Long?	
Reason for Leaving	<b>J</b> :				
Previous Address	(2 Years Req.):				_How Long?:
Reason for Leaving	]:				
Name	of Owner or Agent:			Phone:	
Present Employer (Applicant):					_How Long?:
Addre:	SS:			Phone:	
Emplo	yed As:		Salary:		Per:
Previous Employer	(Applicant):				_How Long?:
Addre:	SS:			Phone:	
Emplo	yed As:		Salary:		_Per:
Present Employer	(Spouse):			How Long?	
Addre:	SS:			Phone:	
Emplo	yed As:		Salary:		_Per:
Previous Employer (Spouse):				How Long?	<u> </u>
Emplo	yed As:		Salary:		_Per:
Other Income \$			Bank:	Acct#:	

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Credit Ref	ferences: Account#s and/or Phone#s(Use bac	ckifnecessary):				
Automobile License #:		_State:	Make and Model:			
Year:	Color:					
Payment A	Amount:\$Name o	f Closest Relative:				
Relationsh	nip:Address	);	Phone:			
1.	Have you ever filed a petition in bankruptcy?:_					
2.	Have you ever been evicted from any tenancy?:					
3.	Have you ever willfully and intentionally refused to pay any rent when due?:					
4.	Have you been convicted of a felony within the past five years?					
5.	Please provide details for any YES answer(s):					
ANY INTENTIONAL FALSE STATEMENT GIVEN ON THIS APPLICATION SHALL CAUSE DEPOSITS GIVEN BY APPLICANT TO BE AUTOMATICALLY FORFEITED!  I agree that the Landlord may terminate any agreement entered into in reliance on any misstatement made above. I acknowledge that the Landlord is not obligated by receipt of this application and deposit to lease to me, but that a decision will be made within two (2) weekdays based on the verification of the information given above and to which this applicant so agrees. Illegible, incomplete, and inaccurate information will cause delays beyond the period stated. Further, the applicant agrees and will be able to pay rent on or by the 1st day of each month and acknowledges forfeiture of all or part of his Deposit if he fails to occupy the premises as agreed. Adult co-tenants not of the same last name must complete separate applications. Applicant hereby authorizes Reilly Realty & Management Corp. to make any inquiries necessary to verify credit worthiness.  I DECLARE THE FOREGOING TO BE TRUE UNDER PENALTY OF PERJURY.						
Date:		Applicant:		_		
Phone:		Applicant		_		
Email Add	ress(es):			<u> </u>		
	ed that all refunds of deposits, which are person application fees will be deducted from refund.	nal checks for rejected application	is, will be ten days from the date of the	check being deposited. Any		

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	THIS PAGE FOR OFFICE USE ONLY	
Move-in Date:		
Lease Term: From	_to	
Approved By:		
Date:	<u>_</u>	
Amounts due for Occupancy:	Amounts Received	Balance Due
	Amt./Date By	Amt./Date By
Rent: 1stlast	_	
Security Deposit:		
Pet Fee or Deposit:	_	
Application Fee:	_	
Totals:		

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