

RESIDENTIAL NEW OWNERSHIP & TENANT PRE-APPROVAL APPLICATION

- **\$100 Single Applicant / \$175 Joint, married**
- **Non-Refundable Regardless of Outcome**
- **Cash, Certified Check, Money order Only**
- **All Occupants 18 and Older Must Apply.**

Property Manager

Property Manager Name: SRK Residential Communities, LLC
Address: 6925 Lake Ellenor Dr Suite 115 Orlando FL 32809
Phone: (407) 992-8808

Purchase Property Information

Purchase Property Address: _____ Longwood FL
32779
Application For Unit: _____

Applicants' Personal Information

Applicant's Name: _____
Home Phone: (_____) _____ Alternative Phone: (_____) _____
Email Address (Optional): _____ Date of Birth: _____
Applicant's Social Security Number: _____

Second Applicant's Name: _____
Second Applicant's Date of Birth: _____
Second Applicant's Social Security Number: _____

Third Applicant's Name: _____
Third Applicant's Date of Birth: _____
Third Applicant's Social Security Number: _____

Name(s) of Dependent(s):	Date(s) of Birth:
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Do you have a pet? Yes / No If more than one, how many? _____

Please describe type(s) of pet(s):

Residential History

Present Address: _____

City: _____ State: _____

ZIP Code: _____ How long at this address? _____

Landlord / Lessor: _____ Phone: (_____) _____

Previous Address 1: _____

City: _____ State: _____

ZIP Code: _____ How long at this address? _____

Landlord / Lessor: _____ Phone: (_____) _____

Previous Address 2: _____

City: _____ State: _____

ZIP Code: _____ How long at this address? _____

Landlord / Lessor: _____ Phone: (_____) _____

Details of Employment

Employer: _____

Position: _____ Date Hired: _____

Supervisor's Name: _____ Phone: (_____) _____

Salary: _____

(If employed less than one year with present employer, please provide previous employer.)

Employer: _____

Position: _____ Date Hired: _____

Supervisor's Name: _____ Phone: (_____) _____

Salary: _____

Other Sources of Income

Do you receive income from any of the following sources? Yes / No

Student Loans _____ Pension Benefits _____ Social Assistance _____ Other _____

Please provide contact persons who could verify the amount of additional income you receive:

Vehicle Information

Make / Model: _____ Year: _____

License Plate Number: _____ Driver's License Number: _____

Make / Model: _____ Year: _____

License Plate Number: _____ Driver's License Number: _____

Parking stall required? Yes / No Additional stall required? Yes / No (Subject to availability)

Banking Information

Banking Institution: _____

Address: _____ Phone: (_____) _____

(If you bank with more than one institution, please list second bank below)

Banking Institution: _____

Address: _____ Phone: (_____) _____

References

Name: _____ Phone: (_____) _____

Name: _____ Phone: (_____) _____

Emergency Contact

Name: _____

Relationship: _____ Phone: (_____) _____

Criminal & Credit Background Check Authorization

Is there anything negative that we may find in our criminal or credit background check that you want to comment on? Anyone with a conviction of a Felony related to Domestic Violence, Sexual Predator, Murder, Use of Gun in Crime Convicted of, Breaking & Entering and Drug Trafficking, Drugs with intent to sell or distribute, will automatically result in the denial of the purchase within this community.

Intended Use of Property Being Purchased

Please select the Use of Property: ___ Buyer to Occupy Full Time, ___ Investment/Rental Property, ___ 2nd Home For Buyer

If purchasing the unit to use as investment or rental property, buyer shall be subject to additional use fees, all tenants must also pass a complete credit/criminal and background check prior to being permitted to taking occupancy and Tenants shall pay a fee annually to the association.

I declare that the information I have provided is accurate. I authorize the individual or organization to whom this application is submitted to: (a) contact my references and all other persons that I have named in this application; and (b) perform a credit and/or criminal check to assess my suitability as a tenant/lessee.

Applicant's Signature _____ Date _____

For Rental Tenant Processing, Once approved The Association has a one-time Renter Fee to be paid by the Tenant(s) of \$750.00. This fee is for each new lease with new occupants.