

TENANT INFORMATION

\$50.00 fee for background check required with application.

DATE _____ UNIT NO. _____

APPLICANT: NAME: _____

SOC. SEC. NO.: _____ DATE OF BIRTH: _____

CO-APPLICANT: NAME: _____

SOC. SEC. NO.: _____ DATE OF BIRTH: _____

PERSONS TO OCCUPY UNIT: (Use other side if more space is needed.)

Name	Relationship to applicant	Age
_____	_____	_____
_____	_____	_____

DESIRED DATE OF OCCUPANCY: _____

ANTICIPATED LENGTH OF OCCUPANCY: _____

CURRENT ADDRESS: _____
(Number and street)

(City, state, zip code)

TELEPHONE NUMBER WITH AREA CODE: _____

E-MAIL ADDRESS: _____

PLEASE LIST ALL AUTOMOBILES: (Use other side if more space is needed.)

Make and Model	Year	Color	Tag Number	State
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

NOTIFY IN CASE OF PERSONAL EMERGENCY:

(Name) (Address) (Telephone) (Relationship)

I hereby authorize Grenelefe Association of Condominium Owners No. 1, Inc. to make inquiries to Merchants Security Exchange regarding my credit, criminal, and eviction history. I understand that the results will be shared with the prospective lessor or lessor's representative.

Applicant signature

Co-Applicant signature