

**RIVER PRESERVE CONDOMINIUM ASSOCIATION, INC.
LEASE APPLICATION**

Owner/Landlord: _____ CELL: _____ EMAIL: _____ .

An application is required of each person that will be living at the property. (Exception: married couples and dependent minor children do not need separate applications.) This application must be **completed in full**. An incomplete application will not be processed.

The following **must** be included with each application. The information contained herein will be used in determining approval of the application.

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	Completed application
	\$100 non-refundable application fee – payable to “River Preserve Condo Association”
	Copy of photo ID
	Proof of income – most recent 2 months paystubs, W-2 form, or 1099 form are acceptable

On what are decisions based?

Approval of this application is made on a non-discriminatory basis

1. **Credit score** - A good to excellent credit score are recommended as this indicates that you are likely to make your rent payments on time. Ideally, we look for a credit score of 670 and above, however the entire credit report and application will be reviewed for extenuating circumstances.
2. **Credit history** – A reputation of making late payments to creditors or a recent bankruptcy can be cause for denial of application.
3. **Background check** – Any adverse criminal history or an eviction may be cause for denial of application.
4. **Work history** – Steady employment is highly recommended for approval.
5. **Income** – It is recommended that your monthly income equals 3 times the rent amount. Consideration may be given to non-married roommates who combine **their** income to meet this qualification.
6. **References** – Unsatisfactory references may be cause for denial of application.
7. **Smoking** – If smoking is prohibited at this property, smoking will be cause for denial of the application.
8. **Pets** – This property is restricted to NO MORE than 2 pets per unit. Certain pets are prohibited. All pets must be disclosed on this application and subsequently registered with the Management Company. **THE LANDLORD/OWNER MAY ELECT TO NOT ALLOW PETS IN THEIR INDIVIDUAL UNIT.**

Applicant: Please return the completed application with the application fee and required documents via USPS or email to:

Owner/Landlord: _____
Address: _____
City _____ State _____ Zip _____
Cell No. _____ Email: _____

Owner/Landlord: Please return the completed application with the application fee, required documents, and an unsigned copy of the lease agreement to be used with this applicant via USPS or email to:

Christine Gillett
Progressive Community Management, Inc. 3701 S. Osprey Avenue
Sarasota, FL 34239-6848
Email: cgillett@pcmfla.com
Tel No: 941-921-5393

THE FOLLOWING INFORMATION MUST BE PRINTED AND LEGIBLE

Unit Address:	Term of Lease:
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Applicant	Spouse
Name:	Name:
Social Security #:	Social Security #:
Birth Date:	Birth Date:
Phone #:	Phone #:
Email:	Email:
Driver's License #:	Driver's License #:
Monthly Income:	Monthly Income:
Current Employer:	Current Employer:
Employer Contact Name:	Employer Contact Name:
Employer phone #:	Employer Phone #:
Previous Employer:	Previous Employer:
Previous Employer Contact:	Previous Employer Contact:
Previous Employer Phone #:	Previous Employer Phone #:
Current Address: Rent or Own (circle one)	
Name Address and Phone # of Current Landlord:	

References: Name, Address & Phone # (other than family or Real Estate Agent) Preferably Local:

1.

2.

3.

Name and Number of Emergency Contact:

Name, Address, and Phone # of Real Estate Agent (if any):

PETS, IF ALLOWED BY LANDLORD Please list pet by type, size, and breed: *Please note Condo Association does NOT ALLOW more than two (2) per unit.*

1.

VEHICLES – List all vehicles that will be parked at property. *Please note that the property is limited to 2 vehicles per unit, and they must be registered with the Condo Association and display a River Preserve Parking sticker.*

Make

Model

Year

Plate #

Color

1.

2.

Names and ages of all persons in addition to applicant and spouse listed above who will occupy the property:

This unit is limited to a total of (5) occupants. All occupants over 18 shall complete a separate lease application.

Name

Age

Relationship to applicant

1.

2.

3.

Does anyone that will be occupying the property smoke? YES or NO (circle one)

Are there any special circumstance or information that you would like us to know? You may provide that here.

By my signature below, I affirm the accuracy and truthfulness of this application. I further agree and accept to be bound by the following conditions and statements:

- I represent that the purpose of this application is to secure a primary residence, for residential use only.
- I understand that the River Preserve Condo Association has specific rules and regulations pertaining to the occupancy and use of the condo unit. I further understand that I am obligated to abide by such rules and regulations and failing to do so may be grounds for terminating the residency and subsequent eviction if necessary. A copy of significant rules and regulations will be provided prior to occupancy.
- **I acknowledge that a background check will be performed as a part of the application process and do hereby authorize the release of public records, credit report, rental or lease information and employment verification, whether by fax, email, verbal, photocopy or original signature, to Progressive Community Management, Inc., River Preserve Board of Directors, and the Owner/Landlord for exclusive use of The River Preserve Condominium Association and Owner/Landlord in connection with this rental application.**
- I agree to hold harmless Progressive Community Management, Inc., the Owner/Landlord, the Condo Association and its Members and Directors, and all providers of information on the prospective tenant's stated above. I agree that I shall not pursue legal action by virtue of this application whether it be approved or denied.
- **If the information provided on this application, by me or on my behalf, is found to be misleading or false, any approval of my tenancy may be immediately terminated.**

Applicant Signature _____ Date _____

Applicant Printed Name _____

Spouse Signature _____ Date _____

Spouse Printed Name _____

Owner/Landlord Signature: _____ Date _____

Owner Printed Name _____

Owner Address: _____

Owner Cell No _____ Owner email _____

Action by Association: Approved Not Approved (circle one)

Conditions:

Signature: _____ Title _____ Date _____