

PALM BAY ESTATES R.O. ASSN, INC.
3092 Indian River Drive NE
Palm Bay, FL 32905
321-723-3353
Fax: 321-723-8875

APPLICATION FOR U.S. CITIZENS:
RENTING FROM SHAREHOLDERS

THE FOLLOWING ITEMS MUST BE SUBMITTED WITH YOUR APPLICATION:

1. Completed **ACCUDATA SCREENING AUTHORIZATION FORM**
2. Completed **TENANT APPLICATION**
3. **COLOR COPY OF DRIVER'S LICENSE** or identification card
4. **BACKGROUND REPORT FEE:** \$75.00 per person. Checks made payable to Palm Bay Estates.
5. **VETERINARIAN'S STATEMENT**, if applicable. (One pet per household, no pets over 40lbs.)

Upon completion of this application please mail or bring to the Association Office at the above address and we will schedule an interview with our Board of Directors.

NOTE: If you neglect to include payment for the background report, we will be unable to process your application.

PLEASE NOTE BELOW THE BEST DAYS AND TIMES FOR YOU TO ATTEND THIS 30 MINUTE INTERVIEW:

Can you meet on a Tuesday? _____ Best Time:

If you cannot meet on Tuesdays, when is the best day of the week to meet with you?

Best time of the day you can meet at the Association Office:

=====
For Office USE: Date Received: _____ by _____.

Interview Scheduled for: _____ at _____.

Reconcilable Differences Management Company
2560 Palm Lake Drive, Merritt Island, FL 32920
Phone: 321-453-1585 Fax: 321-305-6199
Office@RecDif.com www.ReconcilableDifferences.net



PALM BAY ESTATES – US CITIZEN
TENANT SCREENING AUTHORIZATION FORM

Each applicant MUST fill out a separate release

(Please Print)

FULL Name: _____ Sex: _____

Address: _____

City, State, Zip: _____

Social Security Number: _____ Date of Birth: ___/___/___

Driver's License # _____ State Issued: _____

Phone # _____ Cell or Home (circle one)

Lease Term: Number of Months: _____ **Move-In Date:** _____ **Move-Out Date:** _____

Employer Company: _____ Phone: _____ Years with Company: _____

Job Title: _____ Supervisor Name: _____

Have you ever been evicted from a tenancy or left owing money? YES _____ NO _____

Have you ever willfully or intentionally refused to pay rent when due? YES _____ NO _____

Have you ever been in litigation with a landlord? YES _____ NO _____

Have you ever had adjudication withheld or been convicted of a crime? YES _____ NO _____

Have you ever filed bankruptcy? YES _____ NO _____

If you have answered yes to any question above, please provide details on back of this page. Type of Offense, Year it Happened, County and State where it happened and end result.

Last Name of Landlord: _____

Address home being rented: _____

I give my authorization to this landlord, AccuData Inc, or any party or agency contracted by this landlord to obtain and verify the above information, concerning a credit report, criminal records, motor vehicle and other history. I understand that inquiries may be made to various federal and state agencies, employers, and references.

Applicant's Signature _____ Date _____

AccuData Screening Requested:

Package: 1 2 3 4 (please circle one)

Other Services: A B C D E F G H I J

Phone: (954) 755-8379 Fax: (800) 521-1905 E Mail: AccuDataInc@Bellsouth.net

PALM BAY ESTATES R.O. ASSN, INC.
TENANT APPLICATION

Please return the completed profile to office or fax to 321-723-8875.

We do supply other residents with directory of neighbors, so if you wish to be unlisted, please make note of that.

LOT #: _____ **LANDLORD'S NAME:** _____

Address of Home: _____ **Desired Move-In Date:** _____

TENANT APPLICATION NAME: _____

CO-APPLICANT NAME: _____

\NAMES of OTHER RELATIVES OR GUESTS WHO MIGHT VISIT YOU during your tenancy:

_____ Age: _____ Relation: _____

_____ Age: _____ Relation: _____

Other Telephone Numbers: _____ **Home/Cell/Other:** _____

E-Mail Address: _____ **Check if "None"**

Emergency Contact: _____ **Phone #:** _____

Relationship: _____ **State:** _____

PET: (Only one is allowed, weighing less than 40 pounds at maturity. Leash laws and clean-up are enforced.)

Type/Color: _____ Weight: _____ Name: _____

Vehicle Registration: (Include a valid registration for any motorcycle, boat or trailer you wish to store at PBE):

Year: _____ **Make:** _____ **Model:** _____ **Color:** _____ **Tag #:** _____ **State:** _____

Lease Term:

Number of Months: _____ **Move-In Date:** _____ **Move-Out Date:** _____ - _____

Who will be responsible for upkeep of the home and yard while you are renting it? _____

I/We declare that the foregoing information is true and correct, and I/we understand that all information obtained will be maintained in strict confidence.

Signature of Applicant: _____ **Date:** _____

Signature of Co-Applicant: _____ **Date:** _____