

Center Name:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> 2924 Davie | <input type="checkbox"/> Emporium Shoppes | <input type="checkbox"/> Shoppes at Deerfield | <input type="checkbox"/> Sims Creek Plaza |
| <input type="checkbox"/> AmTrust Plaza | <input type="checkbox"/> Palm Beach Place | <input type="checkbox"/> Shoppes at Sawgrass | <input type="checkbox"/> Yamato Village Center |
| <input type="checkbox"/> Coconut Cay Shoppes | <input type="checkbox"/> Shoppes at Boynton | <input type="checkbox"/> Shops at Stirling Place | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Cross Creek Centre | <input type="checkbox"/> Shoppes at Broward | <input type="checkbox"/> Shoppes at Village Pointe | |

Unit Address: _____ **Bay #** _____

 **PERSONAL INFORMATION**

Applicant Name: _____

Date of Birth: ____ / ____ / ____ **Social Security No.:** ____ - ____ - ____

Marital Status: Single Married Separated Divorced Domestic Partnership

Legal Name of Spouse: _____

Driver's License: State Issued: _____ Number: _____

Current Residence: Street Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: _____ Cell Phone: _____

Own Rent From: _____ To: _____

Landlord: Name: _____ Phone: _____

Note: If residential history is less than 5 years, please provide additional information.

Previous Residence: Street Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: _____ Cell Phone: _____

Own Rent From: _____ To: _____

Landlord: Name: _____ Phone: _____

Previous Residence: Street Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: _____ Cell Phone: _____

Own Rent From: _____ To: _____

Landlord: Name: _____ Phone: _____

BUSINESS INFORMATION

Business (Entity) Name: _____

Doing Business As (d/b/a) Name: _____

State of Incorporation: _____ **Federal ID Number:** _____

Primary Use of Business: _____

Other Locations: Yes No **How Many:** _____

Brief Description of Your Business Experience:

EMPLOYMENT INFORMATION

Current Employer: _____ **Phone:** _____

How Long at Present Employer: _____ years months

Title: _____ **Approximate Monthly Net Income:** \$ _____

BANKING REFERENCE

Name of Bank: _____

Phone: _____ **Contact:** _____

Account Number(s): _____

Have you ever had or have been a party to an eviction? Yes No

Have you ever left a property owing money to an Owner or Landlord? Yes No

Have you applied for occupancy anywhere in the past 2 years, but did not move in? Yes No

Have you ever had adjudication withheld or been convicted of a felony? Yes No

If you answered yes to any of the above questions please explain in detail the circumstances regarding the situation:

The Applicant acknowledges that all of the information and above statements on this application for rental/occupancy are true and complete. The Applicant hereby authorizes an investigative consumer report(s) and verification(s) of any and all information from any Agency relating to occupancy history (rental or mortgage), employment history, criminal history records, court records, and credit/income history. Applicant acknowledges that false, misleading, or omitted information herein may constitute grounds for rejection of this application, termination of occupancy (including forfeiture of fees and/or deposits), and may constitute a criminal offense under the laws of the State. The Applicant hereby releases Janoura Realty & Management, Inc. and any related companies, employees, and agents from any liability and responsibility arising from their doing an investigation hereunder. Facsimiles of this application may be used to facilitate multiple inquiries. In the event you receive a facsimile of this authorization for application, it should be considered as an original and the requested information should be released to facilitate a decision.

The Tenant Application will not be processed unless all of the above information is completed and a copy of each Owner's driver's license is provided.

Applicant Signature: _____ **Date:** ____ / ____ / ____