

Rental Application  
for  
**2671 Breaker Lane, Kissimmee, Florida 34762-2862**

Date: \_\_\_\_\_

Applicant (1) \_\_\_\_\_  
Telephone: Home \_\_\_\_\_ Cellular \_\_\_\_\_  
SSN: \_\_\_\_\_

Applicant (2) \_\_\_\_\_  
Telephone: Home \_\_\_\_\_ Cellular \_\_\_\_\_  
SSN: \_\_\_\_\_

Number of Persons to Occupy Premises \_\_\_\_\_

<u>Name</u>	<u>Relationship</u>	<u>Birth Date</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Applicant(s) want to move in? \_\_\_\_\_

Do You Have Any Pets?      YES \_\_\_\_\_      NO \_\_\_\_\_  
What Kinds? \_\_\_\_\_      How Many? \_\_\_\_\_

Present Address: \_\_\_\_\_  
City: \_\_\_\_\_      State: \_\_\_\_\_      Zip: \_\_\_\_\_  
Current Rent Amount: \$ \_\_\_\_\_      Length of Residency: \_\_\_\_\_  
Landlord Name: \_\_\_\_\_      Telephone for Landlord: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_      Evicted?: Yes /No – Please circle

Previous Address: \_\_\_\_\_  
City: \_\_\_\_\_      State: \_\_\_\_\_      Zip: \_\_\_\_\_  
Current Rent Amount: \$ \_\_\_\_\_      Length of Residency: \_\_\_\_\_  
Landlord Name: \_\_\_\_\_      Telephone for Landlord: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_      Evicted?: Yes /No – Please circle

Have you ever Broken a Lease Agreement: \_\_\_\_\_      When and Why?: \_\_\_\_\_

**EMPLOYMENT INFORMATION**

Current Employer (1) \_\_\_\_\_  
Address \_\_\_\_\_  
Office Phone \_\_\_\_\_      Salary/Wages Per Week \_\_\_\_\_  
Length of Employment \_\_\_\_\_      Position \_\_\_\_\_      Supervisor? \_\_\_\_\_

Previous Employer (1) \_\_\_\_\_  
Address \_\_\_\_\_  
Office Phone \_\_\_\_\_      Salary/Wages Per Week \_\_\_\_\_  
Length of Employment \_\_\_\_\_      Position \_\_\_\_\_      Supervisor? \_\_\_\_\_

Current Employer (2) \_\_\_\_\_

Address \_\_\_\_\_  
Office Phone \_\_\_\_\_ Salary/Wages Per Week \_\_\_\_\_  
Length of Employment \_\_\_\_\_ Position \_\_\_\_\_ Supervisor? \_\_\_\_\_

Previous Employer (2) \_\_\_\_\_  
Address \_\_\_\_\_  
Office Phone \_\_\_\_\_ Salary/Wages Per Week \_\_\_\_\_  
Length of Employment \_\_\_\_\_ Position \_\_\_\_\_ Supervisor? \_\_\_\_\_

Other Income \_\_\_\_\_

Financial Information

Bank Name \_\_\_\_\_ Savings \$ \_\_\_\_\_ Checking \$ \_\_\_\_\_  
Other \_\_\_\_\_

Monthly Obligations

Auto Loans:

Lender \_\_\_\_\_ Payment Monthly \$ \_\_\_\_\_  
Lender \_\_\_\_\_ Payment Monthly \$ \_\_\_\_\_

Credit Cards or any other Loans:

Lender \_\_\_\_\_ Payment Monthly \$ \_\_\_\_\_  
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Do you have monthly Child Care Expenses? Y/N \_\_\_\_\_ Payment \$ \_\_\_\_\_

Are you Liable for Child Support Payments? Y/N \_\_\_\_\_ Payment \$ \_\_\_\_\_

Are you Liable for Alimony? Y/N \_\_\_\_\_ Payment \$ \_\_\_\_\_

Have you ever declared Bankruptcy Y/N \_\_\_\_\_ When \_\_\_\_\_

Have you ever had accounts in collections? Y/N \_\_\_\_\_ Payment \$ \_\_\_\_\_

Have you ever had any late pays? Y/N \_\_\_\_\_ Payment \$ \_\_\_\_\_

Have you ever been convicted of any Crimes Y/N \_\_\_\_\_ Felonies? \_\_\_\_\_

Are you qualified for Section 8 housing? Y/N \_\_\_\_\_ If so, at what dollar amount? \_\_\_\_\_

I (We) Understand that if I do not abide by the terms of the lease or fail to pay rent when due, I risk forfeiture of any security deposit and delinquency may be reported to credit reporting agencies.

I (We) authorize and release our signature(s), Date of Birth, and Social Security number(s) to ILI Business Services for the purpose of obtaining credit reports, landlord references, employment verifications, background checks (police, driver license and other).

I (We) acknowledge that ILI Business Services in acting as an agent for the owner.

Signature (1) \_\_\_\_\_

Signature (2) \_\_\_\_\_

\_\_\_\_\_  
Driver License State and Number

\_\_\_\_\_  
Driver License State and Number