



Hoffman Realty, LLC

3900 W. Dale Avenue, Tampa, Florida 33609

APPLICATION FOR RESIDENCY

PLEASE FILL OUT COMPLETELY - THANK YOU

Initial the bottom of each page, sign the 2nd page and attach the signed Rental Process & Application Disclosure

The Non-Refundable Application Fee is \$50.00 per Adult Resident (anyone 18 years of age or older)

Applicant does hereby make application for residency of the following Rental Property, under the following terms and on the following Application Date:

Application Date:	Monthly Rent: \$
Date Lease is to Begin:	Security Deposit(s): \$ or Double with Credit Issues
Initial Term of Lease (Months):	Non-Refundable Pet Fee: \$ per pet
Rental Property Address:	

Please Tell Us About Yourself

Last First Middle Maiden				Date of Birth		Social Security #	
Applicant							
Email Address:						Driver's License #	
Marital Status		Present Phone No. ()		9:00 to 5:00 Contact Phone No.: ()		Ext.	
Have you ever had an eviction filed against you? Yes No				PETS (Keeping of pets requires a pet deposit and landlord's consent) Breed: Age: Weight:			
Present Address		Street # Street Name Apt. # City State Zip		Own: Rent: _____		Since: / / 20 Monthly Payment: \$ _____	
Landlord Mtg. Co.		Name Address City State Zip		Phone No. ()			
Previous Address		Street # Street Name Apt. # City State Zip		Dates:		Landlord Phone#	
Have you or any occupants ever been arrested for, convicted of, put on probation for, or had adjudication withheld or deferred for a felony offense? Yes: No:				If yes, please explain:			
Have you ever intentionally refused to pay rent when due? Yes: No:				If yes, please explain:			

Please Tell Us About Your Job

Present Employer		Name Business Address City State		Phone No. ()	
Position		Supervisor		Monthly Gross Income From To / / / /	
Previous Employer		Name Business Address City State		Phone No. ()	
Position		Supervisor		Monthly Gross Income From To / / / /	

Please Give Us The Following Information

Emergency Contact		Name Street # Street Name Apt. # City State Zip		Phone No. ()	
Automobile 1 st Car		Year Make Model Color Tag #		Automobile 2 nd Car Year Make Model Color Tag #	
Persons to Occupy Dwelling		Name Age			
		_____ Years		Male: _____ Female: _____	
		_____ Years		Male: _____ Female: _____	
		_____ Years		Male: _____ Female: _____	
		_____ Years		Male: _____ Female: _____	
		_____ Years		Male: _____ Female: _____	

How did you find this rental?

Applicant's Initials()

APPLICATION FOR RESIDENCY Page 1 of 2

Revision 05/25

Voice: (813) 875 7474 • Fax: (813) 354 9278 • www.HoffmanRealty.com • E-mail: Info@HoffmanRealty.com



Hoffman Realty, LLC

3900 W. Dale Avenue, Tampa, Florida 33609

AUTHORIZATION: Applicant represents that all of the statements and representations are true and complete, and hereby, authorizes verification of the above information, references and credit records. Applicant understands that an investigative consumer report including information about character, credit history, general reputation, personal characteristics, mode of living, and all public record information including criminal records may be made. Applicant agrees that false, misleading or misrepresented information may result in the application being rejected, will void a lease/rental agreement if any and/or be grounds for immediate eviction with loss of all deposits and any other penalties as provided by the lease terms if any. Applicant authorizes verification of all information by the Landlord and/or Management Company. Applicant has the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation.

ASSOCIATION APPROVAL: Where applicable, this application is subject to and contingent upon the applicant(s) being approved by the condominium or homeowners' association. The applicant(s) will pay any non-refundable application fee required by the condominium or homeowner's association and make application for association approval within 3 days from verbal and/or written approval of this Application for Residency. Occupancy shall not be permitted prior to association approval. In the event that the association, Landlord or Management Company does not approve the applicant(s), any rents and/or security deposits paid will be refunded to the applicant(s). Refunds are subject to applicant(s) funds having cleared our bank account. The non-refundable application fees paid to the association and to Management Company are not refundable under any circumstances.

NON REFUNDABLE APPLICATION FEE: Applicant has paid to Landlord and/or Management company herewith the sum of **\$99.00** per adult applicant as a **NON REFUNDABLE APPLICATION FEE** for costs, expenses, and fees in processing the application.

DEPOSIT AGREEMENT: If the applicant is approved, they shall place, within 1 business day of approval, a **"HOLDING DEPOSIT"** equal to one full month's rental fee (by Cashier's Check or Money Order Only) in consideration for taking the dwelling off the market. Applicant understands that the property is still available for rent or lease to another applicant until such time as a **"HOLDING DEPOSIT"** is received by Management Company and the Landlord and/or Management Company approve applicant. If applicant is approved by Landlord and/or Management Company and the lease is entered into and possession of the property is taken the **"HOLDING DEPOSIT" shall be applied toward the security/damage deposit.** If applicant is approved, but fails to enter into the lease after verbal and/or written approval and/or take possession after lease signing, the **FULL "HOLDING DEPOSIT"** shall be forfeited to the Landlord or Management in addition to any penalties as provided in the lease if the lease has been signed by the applicant. The **"HOLDING DEPOSIT"** shall be refunded only if applicant is not approved. Keys will be furnished only after lease and other rental documents have been properly executed by all parties, utility accounts have been transferred, where applicable, applicant(s) have been approved by the condominium/homeowners association, and only after applicable rents and security deposits have been paid. This application is preliminary only, in no way implies that a particular rental unit shall be available and in no way obligates Landlord or Management to execute a lease or deliver possession of the proposed premises.

I HAVE READ AND AGREE TO THE PROVISIONS AS
STATED

Applicant Signature _____

Date _____

HOLDING DEPOSIT-RECEIVED (Cashier's Check / Money Order Only)		OFFICE USE ONLY
Check Number	\$ _____	
APPLICATION FEE (Cash / Cashier's Check / Money Order Only)		APT. # _____
Check Number	\$ _____	APT. TYPE _____
NON REFUNDABLE PET DEPOSIT (Cashier's Check / Money Order Only)		COMMUNITY _____
Received with application?	Yes: ___ No: ___	Condo or HoA Restrictions? Yes: ___ No: ___
Check Number (if received)	_____	Property Built prior to 1978? Yes: ___ No: ___
FIRST MONTH'S RENT (Cashier's Check / Money Order Only)		LBP Disclosure Signed? Yes: ___ No: ___
Received with application?	Yes: ___ No: ___	COPY OF PHOTO I.D. Yes: ___ No: ___
Check Number (if received)	_____	Credit: Yes: ___ No: ___
BALANCE OF DEPOSIT DUE		Criminal: Yes: ___ No: ___
TOTAL DUE BEFORE MOVE-IN		Employer: Yes: ___ No: ___
RECEIVED BY: _____		Landlord: Yes: ___ No: ___
LEASING AGENT: _____		
APPROVED BY: _____		