

INSTRUCTIONS:

- 1 -All applicants are processed as separate investigations.
- 2 -Print legibly or type all information. Account and telephone numbers and complete addresses are required.
- 3 -If any question is not answered or left blank, this application may be returned, not processed or not approved.
- 4 -Missing information will cause delays in processing your application.
- 5 -Any misrepresentation, falsification or omission of information may result in your disqualification.
- 6 -Only the applicants are authorized to sign all forms on page 2.

APPLICATION FOR OCCUPANCY/APPROVAL

PRINT OR TYPE (Use Black Ink)

Purchase _____ or Lease _____ (How long)

Apt. No. _____ Bldg No. _____ Special Address or Unit _____

Date _____ 20 _____ Desired date of occupancy _____

Applicant #1 (Mr./Mrs./Ms.) _____ Date of Birth _____ Soc. Sec No. _____
(mm/dd/yy) (Alien, Green Card, Social Insurance No.)

Applicant #2 (Mr./Mrs./Ms.) _____ Date of Birth _____ Soc. Sec No. _____
(mm/dd/yy) (Alien, Green Card, Social Insurance No.)

Email Address: _____ Maiden Name _____

Number of expected occupants. (Over age 18) _____ (Under 18) _____

Names & ages of children who will occupy: _____

Description of Pets (Breed, Size, Color, Weight, Etc.) _____

In case of emergency notify: _____
Name Address Telephone

PRINT OR TYPE (Use Black Ink)

RESIDENCE HISTORY

A. Present Address _____ Phone (____) _____
(Street Address, Apt No., City, State, Zip)

Name of Apt. /Condo _____ Phone (____) _____ Dates of Residency _____

Name of Landlord or Mortgage Co. _____ Phone (____) _____

Landlord Email Address: _____

Address _____ Mtg. No. _____

B. Previous Address _____ Your Apt No. _____
(Street Address, Apt No., City, State, Zip)

Name of Apt. /Condo _____ Phone (____) _____ Dates of Residency _____

Name of Landlord or Mortgage Co. _____ Phone (____) _____

Landlord Email Address: _____

Address _____ Mtg. No. _____

C. Prior Address _____ Your Apt No. _____
(Street Address, Apt No., City, State, Zip)

Name of Apt. /Condo _____ Phone (____) _____ Dates of Residency _____

Name of Landlord or Mortgage Co. _____ Phone (____) _____

Landlord Email Address: _____

Address _____ Mtg. No. _____

(Continued on Back)

PRINT OR TYPE (Use Black Ink)

EMPLOYMENT REFERENCES

A. Applicant #1
Employed By (Business Name) _____ Phone (____) _____
(or retired from)
How long _____ Dept. or Position _____ Mo. Income _____
Address _____ Zip _____

B. Applicant #2
Employed by (Business Name) _____ Phone (____) _____
(or retired from)
How long _____ Dept. or Position _____ Mo. Income _____
Address _____ Zip _____

INTERNATIONAL APPLICANTS ONLY

Mother's Full Name, including Maiden Name (Applicant #1) _____
Mother's Full Name, including Maiden Name (Applicant #2) _____

(Continued on Back)

PRINT OR TYPE (Use Black Ink)

BANK REFERENCES

C. Bank Reference _____ Phone (____) _____
How long _____ Ck. Acct. No. _____ Sav. Acct. No. _____
Address _____ Zip _____

D. Bank Reference _____ Phone (____) _____
How long _____ Ck. Acct. No. _____ Sav. Acct. No. _____
Address _____ Zip _____

CHARACTER REFERENCES

1. _____
Name Address Phone (Residential & Office)
Email Address: _____
2. _____
Name Address Phone (Residential & Office)
Email Address: _____
3. _____
Name Address Phone (Residential & Office)
Email Address: _____

VEHICLE INFORMATION

Driver's License. No. #1 _____ #2 _____ State _____
Make _____ Model _____ Year _____ Plate No. _____ Color _____ State _____
Make _____ Model _____ Year _____ Plate No. _____ Color _____ State _____

If this application is NOT legible or is not completely and accurately filled out, Applicant Information (and the Association) will not be liable or responsible for any inaccurate information in the investigation and related report (to the Association) caused by such omissions or illegibility. By signing, the applicant recognizes that the Association or their agent, Applicant Information, may investigate the information supplied by the applicant and a full disclosure of pertinent facts may be made to the Association. The investigation may be made of the applicant's character, general reputation, personal characteristics, credit standing, criminal background and mode of living as applicable. I may request, in writing, within a reasonable time, a complete and accurate disclosure of the nature and scope of any investigation.

Signature _____ Applicant #1 Signature _____ Applicant #2
Date _____ Date _____

APPLICANT(S): Most banks, financial institutions, mortgage companies and employers require your signature and name printed. Make sure Authorization Form is completed as indicated.

ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" at any time after receipt of this authorization and, if I am approved for residency, throughout my tenancy. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by Applicant Information, 2526 Hollywood Blvd; Hollywood, Florida 33020, Phone: 800-315-8606, Fax: 866-741-3258, another outside organization acting on behalf of the Company, and/or the Company itself. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

I understand that by signing and documenting the date below:

- I am authorizing Applicant Information to conduct the background check(s) described above
- I am consenting to and have read and understand the above disclosure

Printed Name: _____

Signature: _____ Date: _____

EACH PERSON SIGN FORM INDIVIDUALLY

DISCLOSURE AND AUTHORIZATION
[IMPORTANT – PLEASE READ CAREFULLY BEFORE SIGNING ACKNOWLEDGMENT]
DISCLOSURE REGARDING BACKGROUND INVESTIGATION

_____ ("the Company") may obtain information about you from a consumer reporting agency for tenant screening purposes. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your criminal history, social security trace, employment and education references, credit history, professional licenses and credentials. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for residency is an investigation into your rental performance history conducted by Applicant Information, 2525 Hollywood Blvd; Hollywood, Florida 33020, Phone: 800-315-8606, Fax: 866-741-3258, or another outside organization. This Disclosure and Authorization allows the Company to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and, if approved for residency, throughout the course of your tenancy to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

California applicants or employees only: By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report at no charge if one is obtained by the Company whenever you have a right to receive such a copy under California law.

New York applicants or employees only: You have the right to inspect and receive a copy of any investigative consumer report requested by Employer by contacting the consumer reporting agency identified above directly. You may also contact the Company to request the name, address and telephone number of the nearest unit of the consumer reporting agency designated to handle inquiries, which the Company shall provide within 5 days.

New York applicants or employees only: By signing below, you also acknowledge receipt of Article 23-A of the New York Correction Law

Washington State applicants or employees only: You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

Massachusetts, Minnesota and Oklahoma applicants or employees only: Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company.

Printed Name: _____

Signature: _____ **Date:** _____

EACH PERSON SIGN FORM INDIVIDUALLY

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

Remedying the Effects of Identity Theft

You are receiving this information because you have notified a consumer reporting agency that you believe that you are a victim of identity theft. Identity theft occurs when someone uses your name, Social Security number, date of birth, or other identifying information, without authority, to commit fraud. For example, someone may have committed identity theft by using your personal information to open a credit card account or get a loan in your name. For more information, visit www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

The Fair Credit Reporting Act (FCRA) gives you specific rights when you are, or believe that you are, the victim of identity theft. Here is a brief summary of the rights designed to help you recover from identity theft.

1. **You have the right to ask that nationwide consumer reporting agencies place “fraud alerts” in your file to let potential creditors and others know that you may be a victim of identity theft.** A fraud alert can make it more difficult for someone to get credit in your name because it tells creditors to follow certain procedures to protect you. It also may delay your ability to obtain credit. You may place a fraud alert in your file by calling just one of the three nationwide consumer reporting agencies. As soon as that agency processes your fraud alert, it will notify the other two, which then also must place fraud alerts in your file.
 - Equifax: 1-800-525-6285; www.equifax.com
 - Experian: 1-888-397-3742; www.experian.com
 - TransUnion: 1-800-680-7289; www.transunion.com

An initial fraud alert stays in your file for at least one year. An extended alert stays in your file for seven years. To place either of these alerts, a consumer reporting agency will require you to provide appropriate proof of your identity, which may include your Social Security number. If you ask for an extended alert, you will have to provide an identity theft report. An identity theft report includes a copy of a report you have filed with a federal, state, or local law enforcement agency, and additional information a consumer reporting agency may require you to submit. For more detailed information about the identity theft report, visit www.consumerfinance.gov/learnmore.

2. **You have the right to free copies of the information in your file (your “file disclosure”).** An initial fraud alert entitles you to a copy of all the information in your file at each of the three nationwide agencies, and an extended alert entitles you to two free file disclosures in a 12-month period following the placing of the alert. These additional disclosures may help you detect signs of fraud, for example, whether fraudulent accounts have been opened in your name or whether someone has reported a change in your address. Once a year, you also have the right to a free copy of the information in your file at any consumer reporting agency, if you believe it has inaccurate information due to fraud, such as identity theft. You also

have the ability to obtain additional free file disclosures under other provisions of the FCRA. See www.consumerfinance.gov/learnmore.

3. **You have the right to obtain documents relating to fraudulent transactions made or accounts opened using your personal information.** A creditor or other business must give you copies of applications and other business records relating to transactions and accounts that resulted from the theft of your identity, if you ask for them in writing. A business may ask you for proof of your identity, a police report, and an affidavit before giving you the documents. It may also specify an address for you to send your request. Under certain circumstances a business can refuse to provide you with these documents. See www.consumerfinance.gov/learnmore.
4. **You have the right to obtain information from a debt collector.** If you ask, a debt collector must provide you with certain information about the debt you believe was incurred in your name by an identity thief – like the name of the creditor and the amount of the debt.
5. **If you believe information in your file results from identity theft, you have the right to ask that a consumer reporting agency block that information from your file.** An identity thief may run up bills in your name and not pay them. Information about the unpaid bills may appear on your consumer report. Should you decide to ask a consumer reporting agency to block the reporting of this information, you must identify the information to block, and provide the consumer reporting agency with proof of your identity and a copy of your identity theft report. The consumer reporting agency can refuse or cancel your request for a block if, for example, you don't provide the necessary documentation, or where the block results from an error or a material misrepresentation of fact made by you. If the agency declines or rescinds the block, it must notify you. Once a debt resulting from identity theft has been blocked, a person or business with notice of the block may not sell, transfer, or place the debt for collection.
6. **You also may prevent businesses from reporting information about you to consumer reporting agencies if you believe the information is a result of identity theft.** To do so, you must send your request to the address specified by the business that reports the information to the consumer reporting agency. The business will expect you to identify what information you do not want reported and to provide an identity theft report.
7. The following FCRA right applies with respect to nationwide consumer reporting agencies:

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a “security freeze” on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely

approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

To learn more about identity theft and how to deal with its consequences, visit www.consumerfinance.gov/learnmore, or write to the Consumer Financial Protection Bureau. You may have additional rights under state law. For more information, contact your local consumer protection agency or your state Attorney General.

In addition to the new rights and procedures to help consumers deal with the effects of identity theft, the FCRA has many other important consumer protections. They are described in more detail at www.consumerfinance.gov/learnmore.