



**The Georgian Condominium Association, Inc.**  
**1621 Collins Ave.**  
**Miami Beach, FL 33139**

Apt No \_\_\_\_\_ Apt Type \_\_\_\_\_ Monthly Rent \_\_\_\_\_  
Occup Date \_\_\_\_\_ Pro-In \$ \_\_\_\_\_ Term Date \_\_\_\_\_  
Referred By \_\_\_\_\_ Rent Starts \_\_\_\_\_  
Reasons For Living Here \_\_\_\_\_

**Application For Occupancy**

Date \_\_\_\_\_ ***IMPORTANT: Each co-resident/co-applicant must submit separate applications.***

**PERSONAL INFORMATION**

Applicants Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ SS No \_\_\_\_\_  
First Middle Last

Marital Status \_\_\_\_\_ Driver License No \_\_\_\_\_ State \_\_\_\_\_ Email \_\_\_\_\_

Spouse's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ SS No \_\_\_\_\_  
First Middle Last

Driver License No \_\_\_\_\_ State \_\_\_\_\_ Email Address: \_\_\_\_\_

**Other Occupants**

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_

Do you own pets? \_\_\_\_\_ If yes, type (breed) \_\_\_\_\_ Size/Weight \_\_\_\_\_

Have you, the co-applicant(s), and/or any occupant(s) ever been arrested, charged and/or convicted of a crime? \_\_\_\_\_ If Yes, Provide detailed explanation. *(Use reverse side of this application)*

Applicants Contact - Phone Number \_\_\_\_\_ / Cellular Number \_\_\_\_\_

Emergency contact (Name/Phone) \_\_\_\_\_

**RESIDENT HISTORY**

Present Street Address \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ To/From \_\_\_\_\_ Monthly Payment \$ \_\_\_\_\_

Landlord's Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Reason For Moving \_\_\_\_\_

Previous Street Address \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

To/From \_\_\_\_\_ Monthly Payment \$ \_\_\_\_\_ Landlord's Name \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Reason For Moving \_\_\_\_\_

Have you and/or the co-applicant(s) ever been evicted from any property? \_\_\_\_\_ If Yes, Provide detailed explanation. *(Use reverse side of this application)*

## EMPLOYMENT HISTORY

**Present employer** \_\_\_\_\_ Supervisor \_\_\_\_\_  
Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Position \_\_\_\_\_ Date of employment \_\_\_\_\_ Gross weekly salary \$ \_\_\_\_\_

**Previous employer** \_\_\_\_\_ Supervisor \_\_\_\_\_  
Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Position \_\_\_\_\_ Dates of employment \_\_\_\_\_ Gross weekly salary \$ \_\_\_\_\_

**Spouses employer** \_\_\_\_\_ Supervisor \_\_\_\_\_  
Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Position \_\_\_\_\_ Dates of employment \_\_\_\_\_ Salary \$ \_\_\_\_\_

## INCOME

Gross annual salary (Including fees, tips, commissions and bonuses) \$ \_\_\_\_\_  
Gross annual salary spouse \$ \_\_\_\_\_  
Other income you want to disclose \$ \_\_\_\_\_

## BANK INFORMATION

Account No \_\_\_\_\_ Account type \_\_\_\_\_ Bank Name and Branch \_\_\_\_\_  
Account No \_\_\_\_\_ Account type \_\_\_\_\_ Bank Name and Branch \_\_\_\_\_

## CHARACTER REFERENCE

Name \_\_\_\_\_ Phone No \_\_\_\_\_ Relation: \_\_\_\_\_  
Name \_\_\_\_\_ Phone No \_\_\_\_\_ Relation: \_\_\_\_\_

*(If necessary use reverse side of this application to list additional accounts)*

## VEHICLES

Year \_\_\_\_\_ Make \_\_\_\_\_ Tag No \_\_\_\_\_ State \_\_\_\_\_ Registered to \_\_\_\_\_  
Year \_\_\_\_\_ Make \_\_\_\_\_ Tag No \_\_\_\_\_ State \_\_\_\_\_ Registered to \_\_\_\_\_  
Year \_\_\_\_\_ Make \_\_\_\_\_ Tag No \_\_\_\_\_ State \_\_\_\_\_ Registered to \_\_\_\_\_

*Applicant(s) has submitted the sum of \$ \_\_\_\_\_, which is non-refundable payment for credit check/background check processing charge of the application. Such sum is not a rental payment or security deposit. This amount will be retained by the management to cover the cost of processing the application. It is understood and agreed between the parties that in the event this application for the above referenced apartment is rejected by \_\_\_\_\_ then said sum so received, as security deposit shall be returned to applicant without interest. It is further understood and agreed that in the event that said application is approved and accepted by \_\_\_\_\_, then said amount received below shall be applied on that security deposit so called for in the lease entered into between the parties. It is further understood and agreed by the parties that in the event that said application is approved and accepted by \_\_\_\_\_ and applicant refuses to enter into a lease agreement for the period of time as called for in applicants application then the sum so received herein shall be retained by \_\_\_\_\_ to serve as liquidation damages it will suffer by reason of applicants failing to enter into residency of that above stated apartment, but the acceptance or rejection of applicant shall remain within the sole discretion of \_\_\_\_\_. \_\_\_\_\_ and United Screening Services Corporation is hereby authorized and given the right to verify by reasonable means the application including but not limited to credit check, criminal history, eviction-civil records, landlord verification, and verification of employment; and to exercise at it's sole discretion as to whether to reject this application and/or to terminate any lease which may be entered into between the parties pursuant to this application, whether during the term of the said lease or any extensions or renewal thereof if the applicant has made any false statements or misrepresentations whatsoever in the application. Furthermore, applicant(s) certify it has not knowingly omitted any information from this application, any additional documents in the application packet, exhibits and/or attachments.*

*Applicant has deposited the sum of \$ \_\_\_\_\_ which is to be applied to the security deposit in reference to the above apartment unit.*

Applicant signature \_\_\_\_\_ Date \_\_\_\_\_

Spouse signature \_\_\_\_\_ Date \_\_\_\_\_

Leasing agent / Interviewed by \_\_\_\_\_ Date \_\_\_\_\_

**Please note:** These sample documents should NOT be construed as legal advice, guidance or counsel. Landlords should consult their own attorney about their compliance responsibilities under the FCRA and applicable state law. United Screening Services Corp. expressly disclaims any warranties or responsibility or damages associated with or arising out of information provided

### DISCLOSURE AND AUTHORIZATION FOR CONSUMER REPORTS

In connection with my application for occupancy for a dwelling and or Residential with \_\_\_\_\_, I understand consumer reports will be requested by you ("Company"). These reports may include, as allowed by law, the following types of information, as applicable: names and dates of previous employers, reason for termination of employment, work experience, reasons for termination of tenancy, former landlords, education, accidents, licensure, credit, etc. I further understand that such reports may contain public record information such as, but not limited to: my driving record, workers' compensation claims, judgments, bankruptcy proceedings, evictions, criminal records, etc., from federal, state, and other agencies that maintain such records.

In addition, investigative consumer reports (gathered from personal interviews, as applicable, with former employers or landlords, past or current neighbors and associates of mine, etc.) to gather information regarding my work or tenant performance, character, general reputation and personal characteristics, and mode of living (lifestyle) may be obtained.

**This authorization is conditioned upon the following representations of my rights:**

I understand that I have the right to make a request to the consumer reporting agency: **United Screening Services, Corp a division of Sarma.** (name) ("Agency"), **555 E Ramsey Rd, San Antonio, TX 78216** (address), telephone number **(305) 774-1711 or (800) 731-2139**, upon proper identification, to obtain copies of any reports furnished to Company by the Agency and to request the nature and substance of **all information** in its files on me at the time of my request, including the sources of information, and the Agency, on Company's behalf, will provide a complete and accurate disclosure of the nature and scope of the investigation covered by any investigative consumer report(s). The Agency will also disclose the recipients of any such reports on me which the Agency has previously furnished within the two year period for employment requests, and one year for other purposes preceding my request (California three years). I hereby consent to Company obtaining the above information from the Agency. I understand that I can dispute, at any time, any information that is inaccurate in any type of report with the Agency. I may view the Agency's privacy policy at their website: [www.unitedscreening.com](http://www.unitedscreening.com).

I understand that if the Company is located in California, Minnesota or Oklahoma, that I have the right to request a copy of any report Company receives on me at the time the report is provided to Company. By checking the following box, I request a copy of all such reports be sent to me. Check here: ☐

As a California applicant, I understand that I have the right under Section 1786.22 of the California Civil Code to contact the Agency during reasonable hours (9:00 a.m. to 5:00 p.m. (PTZ) Monday through Friday) to obtain all information in Agency's file for my review. I may obtain such information as follows: 1) In person at the Agency's offices, which address is listed above. I can have someone accompany me to the Agency's offices. Agency may require this third party to present reasonable identification. I may be required at the time of such visit to sign an authorization for the Agency to disclose to or discuss Agency's information with this third party; 2) By certified mail, if I have previously provided identification in a written request that my file be sent to me or to a third party identified by me; 3) By telephone, if I have previously provided proper identification in writing to Agency; and 4) Agency has trained personnel to explain any information in my file to me and if the file contains any information that is coded, such will be explained to me.

**Are you a service member as defined by s. 250.01, Florida Statutes?** Yes ☐ No ☐

*The term "service member" is defined by s.250.01, Florida Statute to include any person serving as a member of the United States Armed Forces on active duty or state active duty and all members of the Florida National Guard and United States Reserve Forces.*

I understand that I have rights under the Fair Credit Reporting Act, and I acknowledge receipt of the Summary of Rights \_\_\_\_\_ (initials).

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

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

For identification purposes:

Social Security No.: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Driver's License No.: \_\_\_\_\_ State of Issue: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Number: (\_\_\_\_\_) \_\_\_\_\_