



RENTAL APPLICATION

THIS APPLICATION WILL BE PROCESSED WITHIN 24 HOURS

GOOD FAITH DEPOSIT TO HOLD PROPERTY

A HOLDING DEPOSIT OF AT LEAST \$250.00 (PAID IN CASH, MONEY ORDER OR CASHIERS CHECK) WILL HOLD THE PROPERTY IN FAVOR OF THE APPLICANT FOR FIVE BUSINESS DAYS. DEPOSIT MONIES WILL BE APPLIED TOWARDS THE INCEPTION MONIES DUE AT SIGNING. AT THAT TIME, ALL FUNDS MUST BE PAID IN CASH, MONEY ORDER OR CASHIER'S CHECK. IF THE APPLICATION IS DENIED, THE DEPOSIT WILL BE REFUNDED. HOWEVER, IF APPLICANT DOES NOT EXECUTE THE LEASE AFTER THE FIVE DAYS OF APPLICATION APPROVAL, THE DEPOSIT MONIES WILL BE FORFITED.

Application Fee is \$75.00 per Applicant over the age of 18.

PROPERTY LOCATION: _____

TO APPLY, THE FOLLOWING IS REQUIRED:

- All applications must be filled out and signed by the applicant on all pages of the application.
- A processing fee in cash, cashier's check or money order must accompany each application.
- NO APPLICATION WILL BE PROCESSED WITHOUT A PROCESSING FEE.
- Reliable documentation and telephone numbers for all income must be provided, no exceptions.
- Photo documentation (driver's license, military ID or state ID) is required.
- PROOF OF EMPLOYMENT.
- Copy of Recent Bank Statement & Recent Paystubs
- All intended occupants must be listed below.
- You must disclose ALL pets, vehicles of any nature and water filled furniture on this application.
- If self-employed one must provide proof of company (license/certificates, end of year summary, bank statements)

YOU ARE HEREBY NOTIFIED OF THE FOLLOWING PROCEDURES & POLICIES:

- The processing fee is NON-REFUNDABLE.
- Pets must be approved by the lessor.
- If you have water filled furniture, you must supply the lessor with proof of insurance. FS 83.535
- Properties will not be reserved for any periods exceeding 30 days.
- If approved, all monies owed must be paid in full with CASH (certified funds, cashier's check, or money order) PRIOR TO OCCUPANCY AT SIGNING OF LEASE.
- LEASE PREPARATION FEE: **\$125.00** MUST BE PAID PRIOR TO MOVE IN

AUTHORIZATION: I hereby authorize property manager to verify all information contained on the application, and conduct all ground check including but not limited to credit, bank account, employment, eviction, criminal background checks and authorize property manager to contact any persons or companies listed on the application and share information with LANDLORD. I also verify that I have read and agree to the Resident Selection Criteria.

CORRECT INFORMATION: I affirm that all the information on this application, accurate, complete and correct and agree that if this is not so, my application may be denied and/or my lease will be held in default and I may be subject to eviction. I understand this application is the property of M & M REALTY SOLUTIONS LLC.

I ALSO AFFIRM THE FOLLOWING WILL BE THE RESIDENTS OF THE PROPERTY:

List Names (first & last), ages and date of birth of all prospective tenants, including yourself.

OCCUPANT _____ DOB _____

OCCUPANT _____ DOB _____

OCCUPANT _____ DOB _____

OCCUPANT _____ DOB _____

AGENCY DISCLOSURE

This is to advise you that M & M Realty Solutions, LLC., as leasing agent, is the agent for the property owner.

CREDIT / EVICTION / CRIMINAL CHECK AUTHORIZATION

I hereby authorize the owner/agent to run a credit, eviction and criminal check and to contact the individuals/organizations identified in this application and share information with LANDLORD (with the exception of credit report). I understand that the Owned/Agent may deny this application based on findings, and such findings will be kept confidential.

RADON GAS NOTIFICATION

Radon gas is a naturally occurring gas that when it has accumulated in a building is sufficient quantity may present health risks to people who are exposed to it over time. Levels of radon that exceed Federal and State guidelines have been found in building in Florida. Information regarding radon testing may be obtained from you county public health unit.

Signature: _____ Date: _____



M&M Realty Solutions, LLC.

Rental Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

How did you find this rental? : _____

Phone: _____ Email _____

DOB: _____ Social Security No: _____ Driver's License #: _____

Have you ever declared bankruptcy? YES NO If yes, when? _____

Are you currently employed? YES NO Are you a smoker? YES NO

Do you have any pets? YES NO If yes, what type and how many? _____

Have you ever been arrested or convicted of a felony? YES NO Have you ever been evicted? YES NO

How did you hear about us? : _____

Present Address

Present Address: _____

How long? _____ Were you a previous homeowner? YES NO Mortgage/Rent Amount: \$ _____
From: _____ To: _____

Landlord: _____ Phone: _____ Are you interested in being a part of our homeowners' program? YES NO

Reason for leaving: _____ Was a 30-day notice given? YES NO

Did you fulfill the term of your lease, if not explain why? _____

Vehicle

Make/Model _____
/Year: _____

Tag/State: _____ Have any Boat/Rv/Trailer? : _____

M&M Realty Solutions, LLC.

1490 NE Pine Island RD, Suite 4A, Cape Coral, FL 33909

Email to: mmrealtyleasing@gmail.com

Office: (239)656-1620

Fax: 1-(866)653-0463

Employment

Company: _____ Telephone: _____

Address: _____ Supervisor: _____

Job Title: _____ Monthly Income: \$ _____ Approx. Yearly Income: \$ _____

Responsibilities: _____

Time Employed: From: _____ To: _____ Any additional forms of income? (gov. assistance, child support, retirement, disability) If so, how much? : _____

Are you self-employed? YES NO If yes, please provide your tax-id # and attach proof of company: _____

Emergency Contact Name (Cannot be an applicant living in the property with you): _____ Relationship: _____ Phone #: _____

Address for Emergency Contact: _____

Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.
If this application leads to tenancy, I understand that false or misleading information may negate the approval process.
In the event that this information is found to be fraudulent, I understand that the lease may become null in void.*

Signature for Applicant: _____ Date: _____



Additional Rental Application

Additional Applicant Information

Full Name: Last First M.I. Date:

How did you find this rental? :

Phone: Email

DOB: Social Security No: Driver's License #:

Have you ever declared bankruptcy? YES NO If yes, when?

Are you currently employed? YES NO Are you a smoker? YES NO

Do you have any pets? YES NO If yes, what type and how many?

Have you ever been arrested or convicted of a felony? YES NO Have you ever been evicted? YES NO

How did you hear about us? :

Present Address

Present Address:

How long? From: To: Were you a previous homeowner? YES NO Mortgage/Rent Amount: \$

Landlord: Phone: Are you interested in being a part of our homeowners' program? YES NO

Reason for leaving: Was a 30-day notice given? YES NO

Did you fulfill the term of your lease, if not explain why?

Vehicle

Make/Model /Year:

Tag/State: Have any Boat/Rv/Trailer? :

Employment

Company: _____ Telephone: _____

Address: _____ Supervisor: _____

Job Title: _____ Monthly Income: \$ _____ Approx. Yearly
Income: \$ _____

Responsibilities: _____

Time Employed: From: _____ To: _____ Any additional forms of
income? (gov. assistance, child support, retirement, disability)
If so, how much? : _____

Are you self-employed? YES NO If yes, please provide your tax-
id # and attach proof of company: _____

Emergency Contact Name
(Cannot be an applicant
living in the property with
you): _____ Relationship: _____ Phone #: _____

Address for Emergency Contact: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to tenancy, I understand that false or misleading information may negate the approval process.

In the event that this information is found to be fraudulent, I understand that the lease may become null in void.

Signature for
Additional Applicant: _____ Date: _____

References

Please list three references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____



M&M Realty Solutions, LLC.

EMPLOYMENT VERIFICATION

Company Name: _____

ATTENTION: _____ FROM **M&M REALTY SOLUTIONS RENTAL DIVISION**

REPLY FAX 1-866-653-0463

We would appreciate your assistance in filling out the information below for the above named applicant / applicants and faxing or emailing back to us, as soon as possible.

Full Name of Applicant: _____ Date: _____
Last First M.I.

Position: _____

Length Employed From: _____ To: _____ Salary: **Hourly: \$** **Weekly: \$** **Annually: \$**

Are they employed Part Time or Full Time? : PART FULL

OTHER COMMENTS: _____

Supervisor/Overseer Name: _____

Signature: _____ Date: _____

THANK YOU!

M&M Realty Solutions, LLC.
1490 NE Pine Island RD, Suite 4A, Cape Coral, FL 33909

Email to: mmrealtyleasing@gmail.com

Office: (239)656-1620
Fax: 1-(866)653-0463



M&M Realty Solutions, LLC.

RENTAL VERIFICATION REQUEST

Applicants Name: _____

Signature: _____ Date: _____

By the signature(s) above, the above-named applicant(s) have authorized our company to check references for rental purposes. Please fill out the information requested below and fax or email back to the number below.

PLEASE FAX BACK TO: 1-(866)-653-0463

Landlords Name: _____

Monthly Rent Amount: \$ _____ Length of Residency: _____

Number of Late Payments: _____ Returned Checks? : _____

Any documented Complaints?
If so, please explain: _____

Was Applicant asked to leave? : _____ If no, did applicant leave proper notice? _____

Was property left in good condition? : _____ If no, please explain damages: _____

Any money left owed? : _____ If so, how much? \$ _____

Would you rent again to this tenant? : _____

Landlords Signature: _____

Date: _____