

ONLY, AND DOES NOT GUARANTEE THE RENTAL. \$

COASTAL REALTY GROUP OF FLORIDA

15 Utility Dr. Unit D., Palm Coast, Fl. 32137 386-447-7550 Office | 386-447-7311 Fax

Rental Application \$35.00 Credit/Background Fee per Adult. \$45 Lease fee upon approval.

Applicant Informat	ion										
Rental Address:											
Name:	_										
Date of birth:			E-mail:			Phone: Cell:					
Current address:		_									
City:	State:	State:			de:		Dates	to			
Own Rent A	ımt.	Landlord				Phone:			Cell:		
Previous address:		_									
City:	State:	State:			de:	1	Dates	es: to			
Own Rent A				ord		Phone					
Employment Inforn	nation										
Current employer:											
Employer address:								How long?			
Phone:			E-mail:				Fax:				
City:		State:					ZIP Code:				
Position:		Hourly	Salary	(Please circle)		Ann	nual income:		SHOW F	ROOF	
Emergency Contact	:										
Name of a person not resid	ding with you:										
Address:											
City:		State:			Z	IP Cod	e:	Phone:			
Relationship:											
Co-applicant Inform	mation										
Name:						SSN:					
Date of birth:			E-mail:				Phone:		Cell:		
Current address:											
City:			State:				ZIP Code:				
Current employer:											
Employer address:											
Phone:								How long?			
City:			E-mail:				Fax:				
Position:		State:					ZIP Code:				
References		Hourly	Salary	(Please circle)		Ann	nual income:		9	SHOW PROOF	
Name:			Address:			Ph					
PETS: BREED:		l .	WEIG		WEIGH	HT:		AGE:			
PETS:	BREED:					WEI GHT:		AGE:			
CHILDREN OCCUPING:	NAMES:		/		/			/	/		
	AGE:		/ /	AGE:	/ AGI	<u> </u>		/ AGE:	/ AGE:		
APPLICANT:	PLICANT:		DATE:	DATE:		CANT:			DATE:		
APPLICANT / CO-APPLICAI VERIFICATION OF THE AB	NT REPRESENTS	THAT ALI	OF THE S	TATEMENTS AND LLING REFERENCE	l Represent Es and pui	ATION:	S ARE TRUE	AND COMPLE	TE, AND HEREBY AUT	HORIZES MINARY	

Non-Refundable Deposit Required if selected