E.L.W. WOODS LANDING TOWNHOMES LEASE/SALE NOTIFICATION

www. Woods Landings HOA. com

This notification is for: Le	easeSale	
Address:		
Name of Present Owner:		
Mailing Address of Owners:		
		_Phone:
<u>PERSO</u>	NAL DATA ON BUYER	2 / LESSEE
Name:		Home Phone:
Name:		Home Phone:
Vehicle #1: Year:Make:		_License Tag:
Vehicle #2: Year:Make:		_License Tag:
Children (Names and Ages):		
No. of Pets: Breed:		Expected Wt. at Maturity:
Day Time Phone No:		_
In Case of Emergency Please Provide O	Contact Person and Phone	#:
IMPORTANT: PLEASE FILL OUT 10 DAYS IN ADVANCE OF ANTIC		
Email address (for official business	only):	

DATE:

WITNESS:

Please mail or deliver this application along with \$150 application fee to:

Woods Landing % Ameri-Tech Community Management, Inc. 24701 US Highway 19 North, Suite #102 Clearwater, FL 33763

Office 727-726-8000

APPLICANT'S SIGNATURE:

PROPERTY / ASSOCIATION - E.L.W. WOODS LANDING

DATE:

I / We	, prospective	
	2	
Managed By:	Owned By:,	
to obtain information for use in processing of this application. I/we under I/we cannot claim any invasion of privacy or any other claim that may aris	quire into my / our credit file, criminal, and rental history as well as any other personal record, istand that on my / our credit file it will appear the TENANT CHECK has made an inquiry. The against TENANT CHECK now or in the future. E PRINT CLEARLY	
INFORMATION:	SPOUSE/ROOMMATE:	
SINGLE MARRIED	SINGLE MARRIED	
SOCIAL SECURITY #:	SOCIAL SECURITY #:	
FULL NAME:	FULL NAME:	
DATE OF BIRTH:	DATE OF BIRTH:	
DRIVER LICENSE #:	DRIVER LICENSE#:	
CURRENT ADDRESS:	CURRENT ADDRESS:	
HOW LONG?	HOW LONG?	
LANDLORD & PHONE:		
PREVIOUS ADDRESS:	PREVIOUS ADDRESS:	
HOW LONG?	HOW LONG?	
EMPLOYER:	EMPLOYER:	
OCCUPATION:	OCCUPATION:	
GROSS MONTHLY INCOME:	GROSS MONTHLY INCOME:	
LENGTH OF EMPLOYMENT:	LENGTH OF EMPLOYMENT:	
WORK PHONE NUMBER:	WORK PHONE NUMBER:	
HAVE YOU EVER BEEN ARRESTED? (CIRCLE ONE) YES NO	HAVE YOU EVER BEEN ARRESTED? (CIRCLE ONE) YES NO	
HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO	HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO	
SIGNATURE:	SIGNATURE:	
PHONE NUMBER:	PHONE NUMBER:	

BACKGROUND INFORMATION FORM

TENANT CHECK HOURS OF OPERATION: MONDAY - FRIDAY : 9:00 a.m. - 5:30 p.m. SATURDAY : 11:00 a.m. - 4:00p.m.

SATURDAY: 11:00 a.m. - 4:00p.m.
ALL ORDERS RECEIVED AFTER 5:00 p.m. (1:30 p.m. on San.) WILL BE PROCESSED THE
NEXT BUSINESS DAY

TENANT CHECK FAX #: (727) 942-6843

IF THE WRONG SOCIAL SECURITY NUMBER IS SUBMITTED, A SECOND APPLICATION FEE WILL BE CHARGED TO RE-PULL THE REPORT.

A CREDIT REPORTING SERVICE PROVIDING CREDIT REPORTS FOR REALTORS / PROPERTY MANAGERS / APARTMENT COMPLEXES / MOBILE HOME PARKS / CONDOMINIUM ASSOCIATIONS / EMPLOYERS