



11711 N. 50th Street Tampa. Florida. 33617 Leasing 813-988-8777 Fax 813-899-4877

**Application For Residency**

Date: \_\_\_\_\_ How did you hear about us? \_\_\_\_\_

Applicant's Full Name: \_\_\_\_\_

Home Phone# \_\_\_\_\_ Cell Phone# \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security Number \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Present Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ County: \_\_\_\_\_ How Long? \_\_\_\_\_

Driver's License# \_\_\_\_\_ State: \_\_\_\_\_

Type of Vehicle: \_\_\_\_\_ Year: \_\_\_\_\_ Make: \_\_\_\_\_ Tag: \_\_\_\_\_ State: \_\_\_\_\_ Color \_\_\_\_\_

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Phone#: \_\_\_\_\_ Occupation: \_\_\_\_\_ How long? \_\_\_\_\_ Monthly Income \_\_\_\_\_

Present Landlord's Name and Address: \_\_\_\_\_ Phone# \_\_\_\_\_

Have you ever broken a lease agreement, or left owing money to an owner or landlord YES NO

Have you ever been arrested, pleaded no contest, or convicted of a misdemeanor or felony: YES NO

If you answered YES to either of the above please explain: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Relationship \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

**CORRECT INFORMATION:** Applicant represents that all of the above statements are true and complete, and hereby authorized verification of above information, including residential history, employment history, credit records, and criminal history/court records. Applicant acknowledges that false information may constitute grounds for rejection of this application, termination of right of occupancy and of forfeiture of deposits and may constitute a criminal offense under the laws of this state.

**SECURITY DEPOSIT AGREEMENT:** Applicant has paid an "Application Reservation Fees" of \_\_\_\_\_ in consideration for owner taking said apartment off the market, and/or placing applicant on a priority waiting list, while considering approval of this application. If applicant is approved, but fails to promptly enter into the contemplated Lease, the application reservation fee shall be liquidated damages to the owner. The application reservation fees, with the exception of the application fee, will be refunded only if application has been rejected. Keys will be furnished only after the contemplated lease and other rental documents have been properly executed by all parties and only after applicable rentals and reservation fees have been paid. This application is preliminary only and does not obligate owner or owner's agent to execute a lease or deliver possession of the proposed premises. Possession of keys will not be provided until fully executed guaranty forms are received. If forms are not received within five (5) days of lease execution or prior to schedule date of lease commencement, whichever is earlier, the lease will default at option of Owner and all reservation fees, including deposits shall be forfeited.

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_



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## Lease Rental Payment Guarantee

Guaranty made the date set forth below by the undersigned who resides at the address indicated below, hereinafter referred to as Guarantor, to Malibu Apartments, hereinafter referred to as landlord:

### Recitals

Landlord has agreed to lease the premises described below to the person named below as Resident conditioned on Guarantor's giving security for payment of rent and performance of the lease with the Resident in the form of this personal guaranty. In consideration of landlord's entering into lease with the Resident and the Guarantor agrees as follows:

### Statement of Guaranty

**Guarantor guarantees, unconditionally, payment of rent and all other costs, expenses and charges, including attorney's fees, under any lease entered into with the Resident pursuant to the terms of the lease. If Resident defaults in the payment of any installment of rent, Guarantor shall assume all liability and pay the amount of such installment or the accelerated balance at the option of landlord, within ten (10) days after the notice of the default and demand for payment mailed to the Guarantor's address set forth below. Guarantor's liability under this guaranty shall not be affected by the reason of any extension of time for payment of any installment granted by landlord to Resident or by reason of any consent to sublease given by landlord at Resident's request.**

### Duration

This guaranty may not and shall not be revoked during the initial term of the lease. If the lease is renewed, even if on different terms, this guaranty shall remain in full force until receipt by landlord of written notice of revocation from Guarantor.

### Attorney Fees, Costs and Interest

Guarantor agrees to pay landlord's attorney's fees and expenses in the enforcement of the lease and this guaranty prior to and subsequent to judgment and in any and all trial and appellate tribunals, whether suit be brought or not, after default. All amounts due hereunder shall bear interest at the highest rate allowed by law from the date of default until paid. This guaranty is to be performed in Hillsborough County, Florida and any action based on this instrument shall be brought in the appropriate court located in that county and in no other court.



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**Waiver of Notice of Acceptance**

Notice of acceptance of this guaranty is expressly waived. When used herein, the singular pronoun or verb shall include plural.

**GUARANTOR'S INFORMATION**

Resident Name \_\_\_\_\_ Unit# \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Name (please print) \_\_\_\_\_

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

City/State/Zip, \_\_\_\_\_

Telephone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (Cell) \_\_\_\_\_

Social Security# \_\_\_\_\_ Date of Birth \_\_\_\_\_

Driver's License# \_\_\_\_\_ State Issued \_\_\_\_\_

For Residents under age 21: Authorize COED living? Circle one: YES NO

Guarantor's Signature \_\_\_\_\_ Date \_\_\_\_\_

Guarantor represents that all of the information provided is true and complete, and guarantor authorizes verification of the information and credit reports.

.....

This was sworn before me on the \_\_\_\_\_ day of \_\_\_\_\_ Year \_\_\_\_\_ The person above has either produced I D \_\_\_\_\_ or is personally known to me. My commission expires on : \_\_\_\_\_

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Notary Printed Name



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Roommate Matching Profile

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: Male/Female

College \_\_\_\_\_ Major \_\_\_\_\_ Yr. 1st 2nd 3rd 4th Graduate

Desired Move-In Date \_\_\_\_\_ Floor Preference \_\_\_\_\_

**Personal Preferences**

<b>COED LIVING</b>	<b>Yes</b>	<b>No</b>		
<b>SMOKER</b>	<b>Yes</b>	<b>No</b>	<b>Sometimes</b>	<b>Bothers me if others do</b>
<b>(Please note-all rooms are non smoking!)</b>				
<b>DRINK ALCOHOL</b>	<b>Yes</b>	<b>No</b>	<b>Sometimes</b>	<b>Bothers me if others do</b>
<b>STUDY</b>	<b>Often</b>	<b>Sometimes</b>		<b>Seldom</b>
<b>NEATNESS</b>	<b>Very</b>	<b>Somewhat</b>		<b>Messy</b>
<b>ENTERTAIN</b>	<b>Often</b>	<b>Sometimes</b>		<b>Seldom</b>
<b>USE STEREO</b>	<b>Often</b>	<b>Sometimes</b>		<b>Seldom</b>
<b>USE TV</b>	<b>Often</b>	<b>Sometimes</b>		<b>Seldom</b>
<b>I AM .....</b>	<b>An Early Bird</b>	<b>A Night Owl</b>		

**Are you a member of a Sorority or Fraternity? If Yes, which one?**  
\_\_\_\_\_

**Hobbies or other information that you would like to include:**  
\_\_\_\_\_  
\_\_\_\_\_

**Preferred Roomates:** \_\_\_\_\_

I hereby authorize Malibu Apartments to release or share any of the above information relative to pending residents who are searching for a roommate. I understand that there is no guarantee that I will be matched with the perfect roommate.

Applicant's Signature

Date