



**Vehicle Information: NO COMMERCIAL VEHICLES ALLOWED**

Year:	Make:	Model:	Color:	Plate Number:	State:
Year:	Make:	Model:	Color:	Plate Number:	State:

**Emergency Contacts**

Name:	Phone Number:
Address:	
Name:	Phone Number:
Address:	

Have you ever had an eviction filed against you? **Yes** **No**

Have you or any occupants ever been arrested for, convicted of, put on probation for, or had adjudication withheld or deferred for any offense? **Yes** **No**

If **yes**, please explain:

**Applicant agrees that false, misleading or misrepresented information may result in the application being rejected, will void a lease/rental agreement if any and/or be grounds for immediate eviction with loss of all deposits and any other penalties as provided by the lease terms, if any.** I certify that all of the information above about me and my family are true, complete and accurate. I also understand that ALL CHANGES to the INCOME of ANY member of the household as well as ANY changes in family members must be reported to Management in writing IMMEDIATELY.

\_\_\_\_\_  
(Applicant initials)

**Application Fee**

Applicant has submitted the sum \$\_\_\_\_\_ which is a non-refundable payment for the complete processing of the application; receipt of which is acknowledged by a member of Management's Leasing Staff. In the event this application is approved or declined, the sum will be retained; any false information will constitute grounds for rejection of the application. Once submitted, if for any reason I/We shall cancel this application, I/We forfeit the right to any refund of all monies paid.

\_\_\_\_\_  
(Applicant initials)

**Deposit**

Applicant has submitted the sum of \$\_\_\_\_\_ as a good faith deposit in connection with this rental application, to hold a unit off the market. In the event the application is approved and applicant fails to enter into a lease, the applicant shall forfeit this deposit. In the event the application is approved, this deposit shall be applied to the required security deposit. If the application is cancelled by the Applicant within 72 hours, or if for any reason Management decides to decline the application, then the Good Faith Deposit will be returned to the Applicant within 30 days minus any additional processing fees that may have been incurred.

\_\_\_\_\_  
(Applicant initials)

**Applicant Consent**

If the applicant is approved, and I/We fail to occupy the premises on the agreed upon date for any reason, except for delay caused by construction or the holding over of a prior resident, I/We understand that Management will assess damages against the deposit for the amount of rent lost or any expenses incurred due to my cancellation. As these costs are difficult to ascertain, I/We agree to pay, as liquidated damages, a sum equal to fifty percent (50%) of one month's rent for the apartment I/We agree to occupy. I/We understand that the completion of this application does not hold an apartment. Apartments are assigned on a first come first served basis. This application must be complete and approved before I/We will be assigned an address. I understand that if this property is currently under construction, the move-in date may be subject to change.

\_\_\_\_\_  
(Applicant initials)

**Compliance Requirements**

Applicants understand that Resident's occupancy in this residential community is contingent upon meeting guidelines and regulations of the property's affordable housing program eligibility guidelines and includes cooperation with annual income certification. Should Management discover at any time that the Resident no longer meets eligibility requirements, has misrepresented information, provided false information, failed to provide proper documentation, or that unauthorized household members are living in the unit, this would constitute a material violation of the lease and the Resident's tenancy would be subject to immediate termination, regardless of whether any inaccurate information provided by the Resident was intentional or unintentional.

\_\_\_\_\_  
(Applicant initials)

I have read and understand all this information as well as the CHAF Properties LLC/Contemporary Housing Alternative of Florida, Inc./CHA Sandpebble Selection Criteria.

\_\_\_\_\_  
(Applicant initials)

Our communities do not discriminate, as defined in state or federal statute, or by local ordinance, on the basis of race, creed, color, age, sex, familial status, disability, religion or national origin in the lease, use or occupancy of the units.

Signature of Applicant	Date	Phone Number
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**For Office Use Only**

Leasing Consultant: _____	Anticipated Move In: _____	Verified _____	Approved _____
Property: _____	Apartment Size: _____	Verified _____	Approved _____
Special Offered: _____	Yes _____	No If Yes, Explain: _____	
Rental History: _____	Verified _____	Approved _____	Eviction History: _____
Criminal History: _____	Verified _____	Approved _____	Credit History: _____
Compliance: _____			
Verified _____			
Approved _____			