

Safe Haven Equity

727-433-0288

200 2nd Ave S, #174, Saint Petersburg, FL 33701

Date: _____

Desired Property Address: _____

Desired Date to Move In: _____

To guarantee compliance with the Federal Fair Housing Acts, information is required for each applicant over the age of eighteen (excluding dependent children) who will reside at the property.

PLEASE PRINT

Applicant's Full Name: _____

Social Security #: _____ Date of Birth: _____

Driver's License #: _____ State of Issue: _____

Home Phone #: _____ Work Phone #: _____

Cell Phone #: _____ Email Address: _____

Employer: _____ Employer Phone #: _____

Employer Address: _____

Date of Hire: _____ Position: _____

Gross Monthly Pay: \$ _____ Hours per Week: _____

Supervisor: _____

Co-Applicant's Full Name: _____

Social Security #: _____ Date of Birth: _____

Driver's License #: _____ State of Issue: _____

Home Phone #: _____ Work Phone #: _____

Cell Phone #: _____ Email Address: _____

Employer: _____ Employer Phone #: _____

Employer Address: _____

Date of Hire: _____ Position: _____

Gross Monthly Pay: \$ _____ Hours per Week: _____

Supervisor: _____

TO PROCESS IMMEDIATELY PLEASE COMPLETE FORM AND

- 1) Scan and Email to: leaseapplication@safehavenequity.com - **or**
- 2) Fax to 727-914-9929 - **or**
- 3) Mail to 200 2nd Ave S, #174, St. Petersburg, FL - **or**
- 4) Hand deliver to 200 2nd Ave S, #174, St. Petersburg, FL - **or**

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ADDRESS HISTORY

Current Address: _____

Move-in Date: _____ Move-out Date: _____

Rent: \$ _____

Describe why you're moving: _____

Landlord: _____ Phone #: _____

Previous Address: _____

Move-in Date: _____ Move-out Date: _____

Rent: \$ _____

Describe why you moved: _____

Landlord: _____ Phone #: _____

OTHER INCOME YOU WOULD LIKE US TO CONSIDER

(For example: Spousal support, child support, disability, social security, self employment etc...)

1. Source: _____ Gross per Month: \$ _____

2. Source: _____ Gross per Month: \$ _____

LIST TWO (2) PERSONAL REFERENCES TO CONTACT IN CASE OF EMERGENCY

Name: _____ Relationship: _____

Address: _____ Phone #: _____

Name: _____ Relationship: _____

Address: _____ Phone #: _____

LIST ALL VEHICLES OWNED

Year	Make	Model	State/License #

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ANSWER YES OR NO TO THE FOLLOWING QUESTIONS:
(These questions apply to both Applicant & Co-Applicant.)

- | | | |
|-------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|
| 1. Are you prepared to take on the burden of home ownership, including maintenance and repairs? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. Are you prepared to make the monthly payments in full every month on the 1st of the month? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3. Will you have the entire down payment available prior to moving in? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 4. Have you ever been evicted from a property? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 5. Have you filed bankruptcy in the last 7 years? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 6. Have you ever been foreclosed upon in the last 7 years? | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

LIST ALL NAMES AND AGES OF THE INDIVIDUALS THAT WILL RESIDE IN THE PROPERTY

- | | |
|----|----|
| 1. | 2. |
| 3. | 4. |
| 5. | 6. |
| 7. | 8. |

VERY IMPORTANT: When submitting this application, you must attach proof of income for each applicant: pay stubs showing current and year-to-date totals; SSI or disability award letters; if self-employed, deposits and 2 months bank statements. Applications submitted without verification of income will not be processed.

Applicant agrees that all credit information maintained by Safe Haven Equity may be given to any credit reporting service or other persons who request it. Applicant hereby certifies that the information supplied in this application is true. Applicant understands that any false answers or statements made will be sufficient grounds for eviction/forfeiture. Applicant authorizes present and past landlords and Employers, Banks, Credit references, personal references, and any other person to release information regarding applicants credit, rental and employment history.

Please be sure the application is filled out completely. This will ensure a timely and accurate response.

Applicant Signature

Date

Co-Applicant Signature

Date

NOTE: APPLICATIONS WILL NOT be accepted on a "FIRST-COME, FIRST-SERVED BASIS." THIS PROPERTY IS MANAGED BY A PRINCIPAL REPRESENTING HIS INTEREST AND/OR OF THE OWNER OF THE REAL PROPERTY. THE CORPORATION WILL ASSIST ALL PERSONS WITHOUT REGARD TO RACE, COLOR, CREED, SEX, RELIGION, NATIONAL ORIGIN, FAMILIAL STATUS, MARITAL STATUS, HANDICAP, OR ANCESTRY.

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