

Commercial Leasing Application

For Property: _____ Move In Date _____

Fax to: **321-251-1849** or Email to **pm@TopOrlandoRealty.com**
Pay \$45/adult app fee: <http://TopOrlandoRealty.com/rent-application>
Questions? Call Alex Galitsky, Top Orlando Realty: **407-284-1213**

Please Include a copy of Driver License, and other supporting docs

GENERAL INFORMATION

Name _____ Phone _____ Email: _____
Social Security No. _____ Date of Birth _____ Driver's Lic. No. _____

Present Address _____
How long at this address? _____ Rent \$ _____ Reason for moving _____

Owner/Manager _____ Phone _____

Previous Address _____
How long at this address? _____ Rent \$ _____ Reason for moving _____

Owner/Manager _____ Phone _____

BUSINESS INFORMATION

Name of Business _____ Phone _____ Taxpayer ID _____

Location #1 _____ Landlord: _____ Yrs There _____

Location #2 _____ Landlord: _____ Yrs There _____

Location #3 _____ Landlord: _____ Yrs There _____

Previous Occupation _____ Employer _____ Phone _____
How long with this employer? _____ Supervisor _____ Phone _____

HAVE YOU ever filed bankruptcy? _____ ever been evicted? _____ or ever been convicted of a felony? _____ Explain any "yes" answers on back.

Personal Reference _____ Address _____ Phone _____
Contact in Emergency _____ Address _____ Phone _____

I declare that the statements above are true and correct. I authorize verification of my references, credit, criminal, and eviction.

Signed (typed is ok) _____ Date _____