

**Ameri-Tech Community Management**

24701 US Highway 19 N, Suite 102,  
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Phone: (727) 726-8000  
[support@ameritechmail.com](mailto:support@ameritechmail.com)

***Regency Palm Condominium Association, Inc.***

**To ensure that your sales/lease application is processed please remit the following: Application with all fields completed and signed by applicant(s)**

- **\$100 non-refundable application fee payable to Regency Palm Condominium Association**
- **An executed copy of the sales/lease agreement**

*Applicant(s) may not take possession of the unit until approval is granted by the Board of Directors.*

**Number of Dogs** \_\_\_\_\_ **Number of Cats** \_\_\_\_\_ **Weight of Dogs** \_\_\_\_\_ **(25 Pound limit)**

**Unit Number:** \_\_\_\_\_ **Unit Address:** \_\_\_\_\_

**Current Owner(s):** \_\_\_\_\_

**Realtor:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Closing Date:** \_\_\_\_\_ **Title Company:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**1<sup>st</sup> Applicant:** \_\_\_\_\_

	First	Middle Initial	Last
<b>Current Address:</b>	_____	_____	_____
	<small>Street Address</small>	<small>City</small>	<small>State</small>
			<small>Zip</small>

**Phone:** (\_\_\_\_) \_\_\_\_\_ **Alt Phone:** (\_\_\_\_) \_\_\_\_\_

**SS#** \_\_\_\_\_ **Gender :** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_  
Month Date Year

**Drivers License # / US Photo ID #** \_\_\_\_\_ **State Issued** \_\_\_\_\_  
(please circle form of ID provided)

**Email Address:** \_\_\_\_\_

**2<sup>nd</sup> Applicant:** \_\_\_\_\_

	First	Middle Initial	Last
<b>Current Address:</b>	_____	_____	_____
	<small>Street Address</small>	<small>City</small>	<small>State</small>
			<small>Zip</small>

**Phone:** (\_\_\_\_) \_\_\_\_\_ **Alt Phone:** (\_\_\_\_) \_\_\_\_\_

**Gender :** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_  
Month Date Year



## NOTICE OF FINANCIAL OBLIGATIONS

This approval is subject to all financial obligations to the Association including, but not limited to, maintenance fees, late charges, special assessments, legal fees and application fees having been paid in full at the time of occupancy.

\_\_\_\_\_  
Applicant (Signature)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant (Signature)

\_\_\_\_\_  
Date

### AUTHORIZATION TO CONDUCT BACKGROUND INVESTIGATION

Association Name: Regency Palms Condominium Association

In connection with your application to lease or purchase a residence with the, Regency Palms Condominium Association, the Association will obtain one or more consumer reports or investigative consumer reports about you from a consumer reporting agency for applicant screening purposes. The consumer reporting agency is Tenant Check LLC. The report may contain the following types of information about you—credit history and information, and criminal history. By signing below you authorize obtaining such reports about you as part of your application and certify the information provided is true and accurate to the best of your knowledge.

\_\_\_\_\_  
Applicant 1 - Print Full Name (including middle name):

\_\_\_\_\_  
Signature:

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Applicant 2 - Print Full Name (including middle name):

\_\_\_\_\_  
Signature:

\_\_\_\_\_  
Date:

\_\_\_\_\_  
Applicant 3 - Print Full Name (including middle name):

\_\_\_\_\_  
Signature:

\_\_\_\_\_  
Date:

DATE \_\_\_\_\_

CUSTOMER NUMBER \_\_\_\_\_

# TENANT INFORMATION FORM

I / We \_\_\_\_\_, prospective  
tenant(s) / buyer(s) for the property located at \_\_\_\_\_,

Managed By: \_\_\_\_\_ Owned By: \_\_\_\_\_,

Hereby allow TENANT CHECK LLC and or the property owner / manager to inquire into my / our credit file, criminal, and rental history as well as any other personal record, to obtain information for use in processing of this application. I / we understand that on my / our credit file it will appear the TENANT CHECK LLC has made an inquiry. I / we cannot claim any invasion of privacy or any other claim that may arise against TENANT CHECK LLC now or in the future.

**PLEASE PRINT CLEARLY**

<b><u>TENANT INFORMATION:</u></b>	<b><u>SPOUSE / ROOMMATE:</u></b>
SINGLE _____ MARRIED _____	SINGLE _____ MARRIED _____
SOCIAL SECURITY #: _____	SOCIAL SECURITY #: _____
FULL NAME: _____	FULL NAME: _____
DATE OF BIRTH: _____	DATE OF BIRTH: _____
DRIVER LICENSE #: _____	DRIVER LICENSE #: _____
CURRENT ADDRESS: _____ _____ HOW LONG? _____	CURRENT ADDRESS: _____ _____ HOW LONG? _____
LANDLORD & PHONE: _____	LANDLORD & PHONE: _____
PREVIOUS ADDRESS: _____ _____ HOW LONG? _____	PREVIOUS ADDRESS: _____ _____ 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 <input type="checkbox"/> NO <input type="checkbox"/>	HAVE YOU EVER BEEN ARRESTED? (CIRCLE ONE)      YES <input type="checkbox"/> NO <input type="checkbox"/>
HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE)      YES <input type="checkbox"/> NO <input type="checkbox"/>	HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE)      YES <input type="checkbox"/> NO <input type="checkbox"/>
SIGNATURE: _____	SIGNATURE: _____
PHONE NUMBER: _____	PHONE NUMBER: _____

**IMPORTANT**

Please complete this form and return it to Ameri-Tech with your owner/tenant application. Applications received without this form will not be processed.

**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