

**Etiquette MGMT, LLC  
19046 Bruce B. Downs BLVD, #40  
Tampa, FL 33647-2434**

**Voice: (813) 774-6666      Fax: (813) 315-6669**  
**EACH APPLICANT MUST COMPLETE A SEPARATE APPLICATION**

**PLEASE PRINT - ALL information must be completed.**

Address you are applying for: \_\_\_\_\_

Date of desired occupancy: \_\_\_\_\_

Would you like to take advantage of our owner financing or lease purchase programs? \_\_\_\_\_

How much of a down payment can you raise? \_\_\_\_\_

What monthly payment are you trying to work within for your house payment? \_\_\_\_\_

Is your credit, good, fair, or ugly? \_\_\_\_\_

**YOUR PERSONAL INFORMATION**  
**(ONE FORM FOR EACH APPLYING ADULT)**

Full Name \_\_\_\_\_ E-Mail address: \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Driver's License # \_\_\_\_\_ State: \_\_\_\_\_

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

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

How Long? \_\_\_\_\_ If renting, Apartment name/location \_\_\_\_\_ Current Payment: \$ \_\_\_\_\_

Landlord/mgr's name \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Employer # 1: \_\_\_\_\_ Position: \_\_\_\_\_ How Long? \_\_\_\_\_

Address \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Gross Monthly Income before deductions: \$ \_\_\_\_\_

I declare that the application is complete, true and correct and I herewith give my permission for anyone contacted to release the credit or personal information of the undersigned applicant to Management or their authorized agents, at any time, for the purposes of entering into and continuing to offer or collect on any agreement and/or credit extended. I further authorize Management or their Authorized Agents to verify the application information including but not limited to obtaining criminal records, contacting creditors, present or former landlords, employers and personal references, whether listed or not, at the time of the application and at any time in the future, with regard to any agreement entered into with Management. Any false information will constitute grounds for rejection of this application, or Management may at any time immediately terminate any agreement entered into in reliance upon misinformation given on the application.

Applicant: \_\_\_\_\_

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

Use additional sheets as needed. Then fax those forms for each applicant to the number above. We will contact you soon after.