

1151 Masterson St. Melbourne, FL 32935

Date:	
treet Address:	
City/State/Zip:	

GENERAL INFORMATION		
Applicant Name:	Co-Applicant Name:	
Current Address:		
City, St Zip:		
Home Telephone		
Work Telephone		
Cell:		
Email:		

PREVIOUS LANDLORD INFORMATION-Applicant #1			
Landlord Name:			
Current Address:			
Home Telephone:	Work Telephone:	Cell:	

PREVIOUS LANDLORD INFORMATION-Co-Applicant				
Applicant Name:	Co-Applicant N	lame:		
Current Address:				
Home Telephone:	e Telephone: Work Telephone: Cell:			

HOUSEHOLD OCCUPANTS List all members of the household				
	Relationship			
Full Name	to Applicant	Date of Birth	Gender	Social Security Number
1			MF	
2			M F	
3			M F	
4			M F	
5			MF	
List the name(s) of each household member age 18 and over who are full-time students:				
Number of: Elderly Persons Handicapped Persons				ons

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EMPLOYMENT				
Appl	icant's Employer	Co-A	Applicant's Employer	
Name:		Name:		
Phone:	Years Employed:	Phone:	Years Employed:	
Address:		Address:		
Position		Position		
Supervisor:		Supervisor:		

The Fair Housing Act prohibits discrimination in housing because of handicap, race, or color, national origin, religion, sex, or familial status (including children under the age of 18 living

Source	Applicant	Co-Applicant	Other	Total
Employment (salary, wages, bonuses, commissions)				
Interest, Dividends				
Business Net Income				
Rental Net Income				
Social Security Benefits				
Supplemental Security Income (SSI)				
Pension, Retirement Income				
Unemployment, Workers Comp, Veterans Benefits				
Alimony, Child Support				
Welfare Payments				
Other				
· · ·		TOTAL AN	INUAL INCOME	\$

ASSETS-Applicant #1 List all bank accounts (include even if zero or negative balance), certificates of deposit, stock, bonds, mutual funds, IRS's, KEOGH accounts, rental property, vacant property, etc., for each member of the household, including assets owned by minors.

Туре	Family Member #1	Family Member #2	Financial Institution	Current Balance
Checking Account				\$
Checking Account #2				\$
Savings Account				\$
Savings Account #2				\$
Certificates of Deposit				\$
Stocks, Life Insurance				\$
Retirement Account				\$
Property (other than homesteaded)				\$
Other				\$
		TOTAL	CURRENT BALANCE	\$

CERTIFICATION	
WARNING: Florida Statute 87 provides that willful statements or misurelating to financial condition is a misdemeanor of the first degree, put or 775.83.	
I understand that any willful misstatement of information will be grou provided is true and complete to the best of my knowledge. I consent verification related to making a determination of my eligibility for pro- assist in determining eligibility and am aware that all information and	t to the disclosure of information for the purpose of income gram assistance. I agree to provide any documentation needed to
Signature of Applicant	Signature of Co-Applicant
Signature of Applicant	Signature of Co-Applicant
Application Date	

You agree your electronic signature is the legal equivalent of your manual signature on this application.

Please Note:

- Florida Statute, Chapter 119, states in part that "it is the policy of this state that all state, county, and municipal records shall at all times be open for a personal inspection by any person." Certain data contained on this application is Public Information and as such may be inspected and examined by any person desiring to do so per Florida Statute, Chapter 119.
- Florida Statute 817 provides that willful statements or misrepresentation concerning income and assets or liabilities relating to financial condition is a misdemeanor of the first degree and is punishable by fines and imprisonment provided under \$775.082 or 775.83.
- The Fair Housing Act prohibits discrimination in housing because of handicap, race or color, national origin, religion, sex, or familial status (including children under the age of 18 living with parents or legal custodians, pregnant women and people securing custody of children under 18).