

FIRST GULFSTREAM GARDEN APARTMENTS CONDOMINIUM, INC.
215 S.E. 3RD AVE., HALLANDALE BEACH, FL 33009 (PHONE 954-457-7644)

RENTAL RENEWAL APPLICATION FOR OCCUPANCY: UNIT # _____
APPLICANTS UNDERSTAND THAT THIS IS A 55+ YEARS IN AGE ADULT RESIDENTIAL COMMUNITY

IF NOT MARRIED- A SEPARATE APPLICATION MUST BE MADE FOR EACH OCCUPANT

SECTION I - APPLICANT INFORMATION PLEASE PRINT LEGIBLY OR IT WILL BE RETURNED

APPLICANT: _____ D.O.B. ___/___/___ S.S.# _____

PHOTO/I.D.# _____ PHONE # _____ CELL# _____

E-MAIL: _____

APPLICANT SPOUSE: _____ D.O.B. ___/___/___ S.S.# _____

PHOTO/I.D.# _____ PHONE # _____ CELL# _____

E-MAIL: _____

(PLEASE ATTACH COPIES OF PHOTO/I.D.'S)

PLEASE CHECK : SINGLE ___ MARRIED ___ OTHER _____

HAS APPLICANT BEEN CONVICTED OF A FELONY? _____

APPLICANT'S SPOUSE EVER BEEN CONVICTED OF A FELONY? _____

ONLY ONE (1) CAR IS PERMITTED PER UNIT. MUST PROVIDE LEGIBLE COPY OF REGISTRATION AND INSURANCE. IF HERE PRIOR TO 5/2021- THIS DOES NOT APPLY.

SECTION II – RESIDENCE HISTORY PAST 3 YEARS (CITY/STATE/ZIP CODE)

PRESENT ADDRESS: _____ CITY _____ STATE _____ ZIP CODE _____

LANDLORD'S NAME _____ PHONE# _____ CELL # _____

RESIDED FROM: _____ TO: _____ OWN _____ RENT _____

PREVIOUS ADDRESS: _____ CITY _____ STATE _____ ZIP CODE _____

LANDLORD'S NAME _____ PHONE# _____ CELL # _____

RESIDED FROM: _____ TO: _____ OWN _____ RENT ATTACH SEPARATE SHEET

SECTION III – EMPLOYMENT HISTORY PAST 3 YEARS

APPLICANT'S LAST EMPLOYER: _____ PHONE #: _____ FROM _____ TO _____

ADDRESS OF EMPLOYER: _____

POSITION: _____ SUPERVISOR _____ PHONE #: _____

SPOUSE LAST EMPLOYER: _____ PHONE #: _____ FROM _____ TO _____

ADDRESS OF EMPLOYER: _____

POSITION: _____ SUPERVISOR _____ PHONE #: _____

APPLICANT'S SIGNATURE: _____ DATE: _____

CO APPLICANT'S SIGNATURE: _____ DATE: _____