DADE PROPERTY SCREENING SERVICES, INC Background and tenant screening

NON-REFUNDABLE SCREENING FEES

MONEY ORDER ONLY PAYABLE TO: DADE PROPERTY SCREENING SERVICES, INC

NAME OF APPLICANT (S)

APPLICANT (S) E-MAIL ADDRESS:

ADDRESS OF PROPERTY APPLYING FOR______UNIT#_____

- 1) PLEASE BRING A COPY OF YOUR LICENSE and REGISTRATION OF EACH CAR THAT WILL PARKED ON PREMISES.
- 2) A MONEY ORDER IN THE AMOUNT OF \$125.00 PER OCCUPANT OVER THE AGE OF 18.
- 3) EACH OCCUPANT OVER 18 YRS. OLD THAT HAS LIVED IN DADE COUNTY MUST OBTAIN A COPY OF A MIAMI-DADE COUNTY POLICE REPORT. THE COST IS AN ADDITIONAL \$25.00 PER ADULT, MADE PAYABLE TO DADE PROPERTY SCREENING SERVICES, INC. YOU CAN ALSO OBTAIN A COPY AT THE POLICE STATION.
- 4) A COPY OF A SIGNED PURCHASE OR LEASE AGREENEMENT/ CONTRACT.
- 5) COMPLETE AND FULLY FILLED APPLICATION.

OR

****IF YOU HAVE LIVED IN DADE COUNTY FOR LESS THAN 1 YEAR OR CURRENTLY RESIDEOUTSIDE DADE COUNTY, AN ADDITIONAL \$25.00 SHOULD DE ADDED FOR DADE PROPERTY SCREENING SERVICES, INC TO RUN A NATIONAL OR INTERNATIONAL CRIMINAL REPORT. **IF YOU HAVE ANY TYPE OF POLICE RECORD YOU WILL BE DENIED NO MATTER HOW OLD THE RECORD IS.**

The screeningprocess takes an average of 10-15 BUSINESS days.

The process involves sending your application to Dade Property Screening Services, Inc to conduct the background screening of each applicant. The report is then sent back to the Property Management which will then forward it to the Board of Directors for their decision. **PLEASE BE AWARE THAT YOU M UST HAVE A CREDIT FICO SCORE OF OVER 590 POINTS** IF **ITS BELOW YOUR APPLICATION WILL BE DENIED**.

Once the report is reviewed and a determination is made it is brought back to the Property Management Office you will be called and advised of the decision, if approved, the applicants must come in to the Property and personally go over the rules and regulations of the community.

I HAVE READ AND UNDERSTAND THAT NO MATTER THAT THE DETERMINATION OF THE BOARD IS OR IF I DECIDE TO CHANGE MY MIND AFTER SUMMITTING THE APPLICATION, THE FEE IS NON-REFUNDABLE.

SIGNATURE_____

SI	G	NA	٦	UR	E

DATE_____

AUTHORIZATION FOR RELEASE OF BANKING, RESIDENCE, EMPLOYMENT, CREDIT AND POLICE INFORMATION

I/we ____ ____ ____

Hereby authorize the release of information to the Credit Agency and their Attorneys or Representatives, and Dade Property Screening Services Inc. as Agent, concerning My banking, credit, residence, employment or police records to reference to the application for Housing with the Condominium/Home owners Association mentioned in the attached Application for Lease or Purchase and in the Application for Approval.

I/we understand that the Board of Directors of the Condominium/Home Owners Association may cause it be instituted such an investigation of my background as the Board may deem necessary. Accordingly, I specifically authorize the Board of Directors of the Condominium/Home Owners Association, and Dade Property Screening Services, Inc. as Agent, to make such investigation and agree that the information contained in the attached applications may be used in such investigation.

Furthermore, I/we release the Board of Directors and Officers if the Condominium/Home Owners Association, and Dade Property Screening Services, Inc as Agent (to include: employees, officers, directors, brokers, agents, and representative of the foregoing) and all persons and firm providing or receiving information in this report, from any and all claims or liability which might arise from the release, transmission, assembly, interpretation of information, denial or application or other adverse action.

I/we are also authorizing Dade Property Screening Services, Inc to furnish the Lessor with a copy of the Credit and Police Reports and any other information pertinent of this agreement.

Signature of Applicant.

Date.

Signature of Co-Applicant

Date

Communi	ty Name		Prop	erty Addr	ess					
Name of Owner				Own	ers Phone #_			Jnitf.t		
					0.00	<u></u>				_
			APPLICA	ATION f	or APPR	OVAL				
Applicant	Name					Cell/Hon	ne Phone	9		
Last SSN		First DOB			Work P	hone				
	ial Security		Dat	e of Birth	1					_
Co. Applicants Name					Cell/Hom	e Phone				
		Last	First	Middle						
Is Co. Applic	ant Spouse	Yes	No		Relation	Worl to Applican	k Phone			
SSN	·		DOB							
	cial Security			e of Birth			Driver's	License		
			s Name		e r Occupa r Age			ant & Co		nt
_			Middle		//ge			Date of	Birth	
					Age		DOB _			
			Middle		Aae		DOB	Date of		
		First	Middle		0		_	Date of		
Residence	(Where vo	<u>u</u> are living	g n <u>ow)</u>							
Current_							From	To)	
			Apt# .ge Compan y_	-	State	Zip	Month/ Phone	Year Mo <i>H</i>	nth/Yeai	r
<u>Employme</u>	ent					Phonot	<u> </u>			
Applicant'	s Current F	molover								
Job Positio	n		Employer's A	ddress	Street Add	dress		City	State	 Zin
From		То		Monthl	y Sala ry					
Co Applica	nts Current	Employer _				Pł	none #			
Job Positic	n		Employer' s	Add ress						
					Street	Address	Cit	y St	ate	Zip

Banking						
			Account#			
Address _	Bank Name				Circle one: S Phone <i>U</i>	avings or Checking
	Street Address	City	State	Zip		
-	cy Contact:				Dhana#	
Full Nam	e			_		
Address					Relationship	
Characte	er References <u>(Must</u> no					
	Full Name				Home/Cell Phone H_	
	Relationship				Work Phone#	
	Full Name				Home/Cell Phone#	
	———— Relationship				Work Phone ti	
List ALL	/EHICLES to be <u>parked</u>	on the pr <u>emis</u>	es_			
Make	Mod		Year		License Number	
Make	Mod		Year		License Number	
	0	CCUPANT(S)	DISCLOS	SURE AN	D RELEASE	
The infor	mation on this applicati	on is true an	d correct	l hereby	authorize	herein
referred	to as the Association, its	Board of Dir	ectors an	d/or	Dade Property Screenin	g Services, Inc
and their	agents to verify all info	rm at ion in o	connectio	n with this	s application. I understar	nd and authorize
Dade Pro	perty Screening Services	Inc. and it's	agents to	o conduc	t and in depth back gro	und check that may
include v	erifying Character refere	nces, crimina	al records,	etc. fro	om federal, state and ot	her agencies which
maintain	such records. Rental	Verifications	(Cancel	led Ren	tal Checks for the las	st 3 month may be
requested	d). Employment and Sa	alary verificati	ion (Paych	neck stub	s may be requested as p	proof of employment
and abilit	y to meet rental obligatio	ns), any and	l all pub	lic record	ds, credit data, bankrup	tcy proceedings and
evictions.	I hereby authorize Da	de Property	Screenin	g Service	es, Inc. and it's agent's	procurement of my
Consume	er Credit Report(s) if a	oproved as	an occup	ant. Thi	s authorization shall rem	ain on file and shall
serve as	an ongoing authorization	for procurem	ent of abo	ve report	s at any time.	

I also understand this information may be shared with the association, it s agent (Dade Property Screening Services, Inc.) and/or Landlord. I understand that the association will make the final determination as to the approval of my application in relation to occupancy within this community.

Date

Applicant Signature

Date

Co Applicant Signature