

# Riviera Property Management Rental Application

[www.PanhandleBeachResorts.com](http://www.PanhandleBeachResorts.com) • Email: [Rentals@PanhandleBeach.com](mailto:Rentals@PanhandleBeach.com) • Fax (888) 636-9430  
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## Applicant Information

Full Name:		Maiden Name and/or Alias(es):	
Date of birth:	SSN:	Phone:	
Current address:			
City:	State:	ZIP Code:	
Own    Rent    (Please circle)	Monthly payment or rent:	Residency Dates:	
Owner/Manager:		Phone:	
Reason for Leaving:			
Previous address:			
City:	State:	ZIP Code:	
Owned    Rented    (Please circle)	Monthly payment or rent:	Residency Dates:	
Owner/Manager:		Phone:	
Reason for Leaving:			
Prior address:			
City:	State:	ZIP Code:	
Owned    Rented    (Please circle)	Monthly payment or rent:	Residency Dates:	
Owner/Manager:		Phone:	
Reason for Leaving:			

## Employment Information

Current Employer and Address:			
Manager Name:		Manager Phone:	Fax:
City:	State:	ZIP Code:	Employment Dates:
Position:	Hourly    Salary    (Please circle)	Annual income:	

## Co-applicant Information

Full Name:		Maiden Name and/or Alias(es):	
Date of birth:	SSN:	Phone:	
Current address:			
City:	State:	ZIP Code:	
Own    Rent    (Please circle)	Monthly payment or rent:	Residency Dates:	
Owner/Manager:		Phone:	
Reason for Leaving:			
Previous address:			
City:	State:	ZIP Code:	
Owned    Rented    (Please circle)	Monthly payment or rent:	Residency Dates:	
Owner/Manager:		Phone:	
Reason for Leaving:			
Prior address:			
City:	State:	ZIP Code:	
Owned    Rented    (Please circle)	Monthly payment or rent:	Residency Dates:	
Owner/Manager:		Phone:	
Reason for Leaving:			

## Co-applicant Employment Information

Current Employer and Address:			
Manager Name:		Manager Phone:	Fax:
City:	State:	ZIP Code:	Employment Dates:
Position:	Hourly    Salary    (Please circle)	Annual income:	

<b>All Other Proposed Occupants</b>			
Full Name:	Maiden Name and/or Alias(es):	Birth Date:	Relationship to Applicant:
<b>Credit References</b>			
Type:	Bank/Institution Name:	Balance:	Phone:
Checking Account			
Savings Account			
Credit Card			
Auto or Other Loan			
<b>Emergency Contact</b>			
Name of a person not residing with you:			Phone:
Address:		Relationship:	
City:	State:	ZIP Code:	
<b>General Information</b>			
Own a pet that will be occupying the property? <input type="checkbox"/> Yes <input type="checkbox"/> No		Type:	Breed:
Weight:	Age:	Any Other Details of Pet:	
No. of Cars (including company cars):			
Make/Model		Year/Color	Tag No./State
Make/Model		Year/Color	Tag No./State
Have you ever filed for bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when?			
Been served an eviction noticed or asked to vacate a property you were renting? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when?			
Willfully or intentionally refused to pay rent when due? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when?			
Been sued for unlawful detainer? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when?			
Have you ever been charged or convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, details:			
We perform credit and a criminal background checks. Is there anything negative we will find that you want to comment on?			
Rental unit applied for:			
Commencement date:		Term:	Monthly rent:
<p>I/we authorize the verification of the information provided on this form as to my credit and employment and hereby release, in any manner, all of the information obtained by you. I/we further release all persons, agencies, or firms from any liabilities resulting from providing such information. I/we declare under penalty of perjury that the information listed in this application is true and correct.</p> <p>I understand that \$200 of all monies received with this application is an application fee that can be kept by Riviera if the application is rejected. I/we further understand that Riviera Property Management is the leasing agent and representative for the owner/landlord and that the leasing agent's fees will be paid by the owner/landlord. The undersigned acknowledges that this written notice was received prior to acceptance as a lessee for any property.</p>			
Signature of applicant:			Date:
Signature of co-applicant:			Date:
<b>DISCLOSURE NOTICES</b>			
<p><b>RADON GAS</b>—Notice to Prospective Tenant: Radon is a naturally occurring radioactive gas that, when it has accumulated in a building in sufficient quantities, may present health risks to persons who are exposed to it over time. Levels of radon that exceed federal and state guidelines have been found in buildings in every state. Additional information regarding radon and radon testing may be obtained from your county public health unit.</p>			
<p><b>LEAD PAINT</b>—Every purchaser of any interest in residential real property on which a residential dwelling was built prior to 1978 is notified that such property may present exposure to lead from lead-based paint that may place young children at risk of developing lead poisoning. Lead poisoning in young children may produce permanent neurological damage, including learning disabilities, reduced intelligence quotient, behavioral problems and impaired memory. Lead poisoning also poses a particular risk to pregnant women. The seller of any interest in residential real estate is required to provide the buyer with any information on lead-based paint hazards from risk assessments or inspection in the seller's possession and notify the buyer of any known lead-based paint hazards. A risk assessment or inspection for possible lead-based paints is recommended prior to purchase.</p>			

## TENANT CREDIT AUTHORIZATION RELEASE

In connection with my application for tenancy, I hereby authorize Vetted Services, Inc. to furnish a consumer credit report and a criminal background investigation regarding me. The information from the credit report will not be used in violation of any Federal or State Equal Employment Opportunity Law or Regulation.

I (the applicant) have the right to obtain a copy of the report and the right to dispute any information. I may contact Vetted Services, Inc. directly at (850)-215-1891. A consumer report may be obtained at any time during the application process with the below named company.

**I HEREBY AUTHORIZE, WITHOUT RESERVATION, ANY INFORMATION SERVICE BUREAU CONTACTED BY VETTED SERVICES, INC. TO FURNISH THE ABOVE-MENTIONED CREDIT INFORMATION.**

**Re: Residents of Oklahoma, California & Minnesota (ONLY)** have specific disclosure requirements and we are required to give residents of these states an option to receive a copy of their consumer report. Check off to indicate if you wish to receive a copy: YES ( ) NO ( )

I understand that if any adverse action is taken, based in whole or in part on the information contained in the consumer report, I will be provided a copy of the report, the name, address and telephone number of the reporting agency, a summary of my rights under the Fair Credit Reporting Act, as well as additional information on my rights under the law.

I acknowledge that a telephonic facsimile or copy of this release shall be as valid as the original. This release is valid for all federal, state, county and local agencies and authorities.

**Print Name: (last, first, middle)**

\_\_\_\_\_  
**Previous Name(s): (with dates of name changes)**

\_\_\_\_\_ **SSN:** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_

**Driver's License #:** \_\_\_\_\_ **State of Driver's License:** \_\_\_\_\_

**IF "YEARS/MONTHS" FOR CURRENT OR PREVIOUS ADDRESS ARE LESS THAN 5 YEARS, PROVIDE ADDITIONAL PREVIOUS ADDRESSES ON THE BACK OF THIS FORM.**

**Current Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **ZipCode:** \_\_\_\_\_ **Years/Months There:** \_\_\_\_\_

**Previous Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **ZipCode:** \_\_\_\_\_ **Years/Months There:** \_\_\_\_\_

**Applicant Signature:** \_\_\_\_\_ **Date Signed:** \_\_\_\_\_

\*\*\*\*\***FOR OFFICIAL USE ONLY**\*\*\*\*\*

**Company Performing Check:** \_\_\_\_\_ **Initials:** \_\_\_\_\_

**Full Address of Property:** \_\_\_\_\_ **Owner's Name:** \_\_\_\_\_