YCL MANAGEMENT INC
PROPERTY MANAGEMENT

Applicant's Information

Date of Application:	
Name of Community:	

Property Address:		
Owner's mailing address:		
Leasing Consultant:		
Monthly Rent	Move in Date:	
Co-Signer (Yes or No)	# of Applicants:	

Applicant 1

Name:		
Address:		
City :		
Cell Number:		
Email:		
SS#:	DOB:	Current Rental Amount:
Income Detail	Gross Monthly Income:	
	Additional Monthly Income:	
	Total Gross Monthly Income:	

Applicant 2

Name:		
Address:		
City :		
Cell Number:		
Email:		
SS#:	DOB:	Current Rental Amount:
Income Detail	Gross Monthly Income:	
	Additional Monthly Income:	
	Total Gross Monthly Income:	

10300 Sunset Drive, Suite 315
Miami, Florida 33173
Phone:786-361-1373 Fax:786-361-1376 Business Hours: M-F 9:00 AM – 5:00PM

YCL MANAGEMENT INC
PROPERTY MANAGEMENT

Applicant's Information

Applicant 3		
Applicant's Name:		
SS#: Marital Status:	DOB:	
Driver's License:		State
Cell Number:	Home Phone Number:	
Applicant 4		
Applicant's Name:		
SS#:		DOB:
Driver's License:		State:
Cell number:	Home Phone Number:	

Other Occupants: (under 18 Yrs. Of Age)

Name:	
Relationship:	Age:
Name:	
Relationship:	Age:
Name:	
Relationship:	Age:

Resident History

Present Address Street: Apt#	
City: Zip Code:	State:
Date to/From:	Monthly Payment:
Apt. Name/if Home, Mortgage company and loan no. Number:	Phone
Reason from Moving	
Previous Address Street: Apt#	
City: Zip Code:	State:
Dates to/From:	Monthly Payment:
Apt. Name/if Home,Mortgage Company and Loan no.	
Phone Number:	
Reason for moving:	
Have you ever been evicted from any leased premises? If yes, explain.	

YCL MANAGEMENT INC
PROPERTY MANAGEMENT

Employment

Employer:	Position:
Business Address:	Business Phone:
Supervisor:	Employed Since:
Gross Weekly Salary:	

Employer:	Position:
Business Address:	Business Phone:
Supervisor:	Employed Since:
Gross Weekly Salary:	

Employer:	Position:
Business Address:	Business Phone:
Supervisor:	Employed Since:
Gross Weekly Salary:	

Vehicles
(Rules & Regulations may limit number of vehicles permitted. Please reference rules & regulations)

Make	MODEL	YEAR	TAG#	COLOR	REGISTERED TO:

Pets
(Pet restrictions may apply to certain communities. Please reference rules & regulations)

Kind:	weight (lbs)
Kind:	weight (lbs)

10300 Sunset Drive, Suite 315
Miami, Florida 33173
Phone:786-361-1373 Fax:786-361-1376 Business Hours: M-F 9:00 AM – 5:00PM

Emergency Contacts

Name:	
Relationship	Age:
Address:	Phone:
Name:	
Relationship	Age:
Address:	Phone:
Name:	
Relationship:	Age:
Address:	Phone:

Applicant hereby represents that all above statements are true and correct and are made to induce owner and its agents to lease or rent and apartment. Owner and its agents are hereby authorized and given the right to verify by reasonable means the application including, without limitation, ordering credit and criminal reports, and authorized to exercise in its sole discretion as to whether to reject the application and/or to terminate any lease which may be entered into between the parties, pursuant to this application whether during the term of said lease or any extensions or renewals thereof, if the applicant has made any false or misleading statements or misrepresentations in the application.

Applicant's Signature: _____ Date: _____

Applicant's Signature: _____Date: _____

Co-Signer: _____ Date: _____

Second co-signer: _____Date: _____

Owner/Leasing Agent: _____Date: _____

10300 Sunset Drive, Suite 315
Miami, Florida 33173
Phone:786-361-1373 Fax:786-361-1376 Business Hours: M-F 9:00 AM – 5:00PM