



APPLICATION FORM

APPLICATION CHECKLIST

PROPERTY ADDRESS:

		UNIT
City	State	Zip Code

OWNER:

First Name	Middle Name	Last Name

APPLICANT:

First Name	Middle Name	Last Name

ALL THE ITEMS BELOW ARE REQUIRED PRIOR TO PROCESSING OF APPLICATION:

- ☐ Screening Fee Single US Resident \$110.00 / Non-US Citizen and Married US Resident \$160.00
Check / Money Order / Real Estate Check ONLY
Payable to: TRIZEL Commercial Real Estate Services, LLC.
- ☐ **(Lease Only)** Security Deposit (refundable) – \$400.00
Check ONLY
Payable to: VILLAGGIO IN THE GROVE CONDOMINIUM ASSOCIATION, Inc.
- ☐ Application Completed
One (1) Application and Fee per married couple
One (1) Application and Fee for each individual non-married applicant residing
- ☐ **(Lease Only)** Copy of Lease by Tenant and Owner – Six (6) month minimum
- ☐ **(Sale Only)** Copy of Sales Contract/ Investment: circle the intend of use: rental property – (6+ month lease only) Seasonal Secondary Primary
- ☐ Three (3) Character Reference Letter (1) Personal, (1) Professional, (1) Employer
- ☐ One (1) current employer verification letter
- ☐ Copy of Driver's License(s) **(All Applicants)**
- ☐ Copy of Vehicle(s) Registration(s)
- ☐ Copy of Vehicle(s) Insurance(s)
- ☐ Copy of Dog License(s), Breed Type: _____ and Rabies Vaccine(s)
- ☐ Signed Acknowledgement of Rules and Regulations



APPLICATION FORM

PURCHASE / RENTER APPLICATION

1. APPLICANT:

First Name

Middle Name

Last Name

Current Address:

City

State

Zip Code

Phone No.

Cell

e-mail

2. APPLICANT:

First Name

Middle Name

Last Name

Current Address:

City

State

Zip Code

Phone No.

Cell

e-mail

Occupy Premises:

Total No. People

Total No. Children

Total No. Pets

Emergency Contact:

Phone No.

Cell

e-mail

Bank Reference:

Account No.

Location

Phone No.

1. REFERENCE:

First Name

Last Name

Phone No.

2. REFERENCE:

First Name

Last Name

Phone No.

3. REFERENCE:



APPLICATION FORM

First Name

Last Name

Phone No.

EMPLOYMENT INFORMATION

1. Applicant Employer:

Title

Date of Employment

Phone No.

Phone No.

Cell

e-mail

2. Applicant Employer:

Title

Date of Employment

Phone No.

Phone No.

Cell

e-mail

VEHICLE INFORMATION

1. VEHICLE No.

Make

Year

Model

State

Color

Tag No.

2. VEHICLE No.

Make

Year

Model

State

Color

Tag No.

Applicant(s) represents that all of the above stated information on the application is true and complete, and hereby authorizes a full investigative consumer report and verification of any and all information relating to criminal history records, court records, and credit records. Applicant acknowledges that false or omitted information herein may constitute grounds for rejection of this application, and/or forfeiture of fees or deposits and may constitute a criminal offense under the laws of this State. I/We hereby release TRIZEL Commercial Real Estate Services, LLC. from any liability and responsibility arising from their doing so. Facsimiles of this authorization may be used to facilitate multiple inquiries. In the event you receive a facsimile of this authorization, it should be treated as an original and the requested information should be released to facilitate my/our application for occupancy.

SIGNATURE:

DATE:

MM

DD

YY



APPLICATION FORM

RULES AND REGULATIONS ACKNOWLEDGEMENT

PROPERTY:

I / WE:

Please Print Name

*HAVE READ THE RULES AND REGULATIONS AND FULLY
UNDERSTAND EACH OF THE RULES AND WILL ABIDE BY THEM.*

*AND FURTHER UNDERSTAND THAT A VIOLATION OF THE RULES
AND REGULATIONS COULD RESULT IN A FINE.*

SIGNATURE:

DATE:

SIGNATURE:

DATE:

SIGNATURE:

DATE:

SIGNATURE:

DATE:

TRIZEL COMMERCIAL REAL ESTATE SERVICES LLC.

2460 SW 22nd Street

Miami - FL 33145

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