CREWS PROPERTIES D/B/A BENEVA GARDENS APARTMENTS
7389 Cloister Drive – Office • Sarasota, FL 34231
Phone: 941-922-7550 Website: www.BenevaGardens.com
Email: benevagardensapartmentsllc@gmail.com

TENANT APPLICATION FORM

NAME: _____ ☐ MALE ☐ FEMALE *(please check one)*

HOME & CELL PHONE #s: _____ _____

EMAIL: _____ **TYPE OF APARTMENT:** ☐ 1-BD ☐ 2-BD ☐ EFFICIENCY

DESIRED DATE OF OCCUPANCY: _____

RENTAL HISTORY for PAST TWO YEARS

CURRENT LANDLORD: _____ LANDLORD'S PHONE: _____

ADDRESS, CITY, STATE: _____ DATES OF OCCUPANCY: _____

PREVIOUS LANDLORD NAME: _____ LANDLORD'S PHONE: _____

ADDRESS, CITY, STATE: _____ DATES OF OCCUPANCY: _____

EMPLOYMENT HISTORY for PAST TWO YEARS

CURRENT EMPLOYER: _____ POSITION: _____

DATES OF EMPLOYMENT: _____ PHONE: _____

ADDRESS, CITY, STATE: _____

PREVIOUS EMPLOYER: _____ POSITION: _____

DATES OF EMPLOYMENT: _____ PHONE: _____

ADDRESS, CITY, STATE: _____

PERSONAL

MARITAL STATUS: _____ DO YOU SMOKE? _____ PETS: _____

NAME & RELATIONSHIP TO OTHER OCCUPANT(S) OF APARTMENT: _____

BANK REFERENCE: _____ SOCIAL SECURITY #: _____

MONTHLY INCOME FROM ALL SOURCES: $ _____

HAVE YOU EVER BEEN ARRESTED OR CHARGED WITH A CRIME? _____ IF YES, NATURE OF OFFENSE: _____

HAVE YOU EVER FILED FOR BANKRUPTCY? _____ IF YES, DATE: _____

VEHICLE INFORMATION *(Please provide photocopy of Driver's License)*

MAKE/MODEL/YEAR: _____ LICENSE TAG #: _____

(No Motorcycles or Work Trucks)

By signing below, you authorize Beneva Gardens Apartments, or its agent, to verify information.

X _____ _____

SIGNATURE *DATE*