

DRUID OAKS ASSOCIATION, INC.
c/o Ameri-Tech Property Management
24701 US Highway 19 North ~ Suite 102 ~ Clearwater, FL 33763
Phone: 727 726 8000 ~ Fax: 727 723 1101

PURCHASE APPLICATION
INTERVIEW REQUIRED

NEW RESIDENT After approval by Druid Oaks Board, immediately send this application
To Ameri-Tech Property Management

Address of unit purchased _____
Date of Closing: _____ Title Company _____
Title Co. Address _____
Realtor Name _____ Phone # _____
Real Estate Co _____ Phone # _____
Address _____ Fax # _____

NEW RESIDENT INFORMATION

Name _____ Date of Birth _____
Last First Middle

Name _____ Date of Birth _____
Last First Middle

Current Address _____

Phone Home: _____ Work _____ Cell _____

Occupancy: Year around: _____ Seasonal: _____ Leased: _____

Additional Occupants:

Name _____ Relationship _____ Age _____

Name _____ Relationship _____ Age _____

Vehicle Information:

Year _____ Make _____ Color _____ State _____ Tag # _____

Year _____ Make _____ Color _____ State _____ Tag # _____

PET(s): One House Cat: _____ and/or One Dog (not to exceed 20#): _____

Have you received a set of Condominium Documents: Yes _____ No _____

Buyer hereby acknowledges that he/she has read and examined the Declaration of Condominium, the Rules and Regulations contained therein and the By-Laws of the Association and further acknowledges and agrees to abide by each and every term and condition of the same, as well as the Rules and Regulations of the Condominium Association. The undersigned further understands that he/she is directly responsible and accountable for any and all actions of family members, guests, employees and agents who are in/on the premises of Druid Oaks Association. I/we certify that all the information provided on this Application is correct.

Buyers Signature _____ Date _____

Buyers Signature _____ Date _____

Director _____ Date _____

Director _____ Date _____

74 15 (0) + 22

CUSTOMER NUMBER 2325 - AMERI-TECH

PROPERTY / ASSOCIATION - _____

BACKGROUND INFORMATION FORM

DATE: _____

I / We _____, prospective
tenant(s) / buyer(s) for the property located at _____

Managed By: _____ Owned By: _____

Hereby allow TENANT CHECK and or the property owner / manager to inquire into my / our credit file, criminal, and rental history as well as any other personal record, to obtain information for use in processing of this application. I / we understand that on my / our credit file it will appear the TENANT CHECK has made an inquiry. I / we cannot claim any invasion of privacy or any other claim that may arise against TENANT CHECK now or in the future.

PLEASE PRINT CLEARLY

INFORMATION:	SPOUSE / ROOMMATE:
SINGLE _____ MARRIED _____	SINGLE _____ MARRIED _____
SOCIAL SECURITY #: _____	SOCIAL SECURITY #: _____
FULL NAME: _____	FULL NAME: _____
DATE OF BIRTH: _____	DATE OF BIRTH: _____
DRIVER LICENSE #: _____	DRIVER LICENSE #: _____
CURRENT ADDRESS: _____ HOW LONG? _____	CURRENT ADDRESS: _____ HOW LONG? _____
LANDLORD & PHONE: _____	LANDLORD & PHONE: _____
PREVIOUS ADDRESS: _____ HOW LONG? _____	PREVIOUS ADDRESS: _____ HOW LONG? _____
EMPLOYER: _____	EMPLOYER: _____
OCCUPATION: _____	OCCUPATION: _____
GROSS MONTHLY INCOME: _____	GROSS MONTHLY INCOME: _____
LENGTH OF EMPLOYMENT: _____	LENGTH OF EMPLOYMENT: _____
WORK PHONE NUMBER: _____	WORK PHONE NUMBER: _____
HAVE YOU EVER BEEN ARRESTED? (CIRCLE ONE) YES NO	HAVE YOU EVER BEEN ARRESTED? (CIRCLE ONE) YES NO
HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO	HAVE YOU EVER BEEN EVICTED? (CIRCLE ONE) YES NO
SIGNATURE: _____	SIGNATURE: _____
PHONE NUMBER: _____	PHONE NUMBER: _____

TENANT CHECK HOURS OF OPERATION:
MONDAY - FRIDAY : 9:00 a.m. - 5:30 p.m.
SATURDAY : 11:00 a.m. - 4:00p.m.
 ALL ORDERS RECEIVED AFTER 5:00 p.m. (3:30 p.m. on Sat.) WILL BE PROCESSED THE NEXT BUSINESS DAY

TENANT CHECK FAX #: (727) 942-6843

IF THE WRONG SOCIAL SECURITY NUMBER IS SUBMITTED, A SECOND APPLICATION FEE WILL BE CHARGED TO RE-PULL THE REPORT.

A CREDIT REPORTING SERVICE PROVIDING CREDIT REPORTS FOR REALTORS / PROPERTY MANAGERS / APARTMENT COMPLEXES / MOBILE HOME PARKS / CONDOMINIUM ASSOCIATIONS / EMPLOYERS