

DeLand Opera House

Historic Apartments for Rent



Applicant's Name: _____

Birth Date: _____ Driver's Lic.#: _____

Social Security # _____

Home phone: _____ Cell phone: _____

Work phone: _____

E-Mail Address: _____

I also affirm the following will be the residents of the property: (Please list the first and last names of all prospective residents, including yourself)

Name _____

Birthdate _____ SS# _____

Name _____

Birthdate _____ SS# _____

RENTAL HISTORY

Present Address: _____ City: _____

State: _____ Zip: _____ Landlord: _____

Phone: _____ Rent Amount: _____

Rent From: _____ to _____

30-day notice given? _____

Reason for Leaving: _____

Former Address: _____ City: _____

DELAND OPERA HOUSE APARTMENTS

State: _____ Zip: _____ Landlord: _____

Phone: _____ Rent Amount: _____

Rent From: _____ to _____

30-day notice given? _____

Reason for Leaving: _____

EMPLOYMENT HISTORY

Current Employment: _____

Phone: _____

Supervisor: _____ Your Position: _____

Length Employed: _____ to _____ F\T: _____ P\T: _____ Salary: _____

Per: _____

Previous Employment: _____

Phone: _____

Supervisor: _____ Your Position: _____

Length Employed: _____ to _____ F\T: _____ P\T: _____ Salary: _____

Per: _____

VEHICLE(S) INFORMATION

List Make & Model: _____ License #: _____

List Make & Model: _____ License #: _____

ADDITIONAL INFORMATION

Do you smoke? _____ Have you ever declared bankruptcy? _____

Have you ever had an eviction filed against you? _____

Have you ever been charged with a felony? _____

Have you ever been charged with a misdemeanor? _____

DELAND OPERA HOUSE APARTMENTS

Have you ever refused to pay rent/broken a lease? _____

Are you Active Military Personnel? _____

Are you on Military Reserves? _____

EMERGENCY CONTACT INFORMATION

Name: _____

Relationship: _____ Home phone: _____

Cell phone: _____ Work phone: _____

Applicant represents that all of the statements and representations are true and complete, and hereby, authorizes JoHelen, LLC verification of the above information, references and credit report. Applicant understands that an investigative consumer report including information about character, credit history, general reputation, personal characteristics, mode of living, and all public record information including criminal records may be made. Applicant hereby gives permission to JoHelen, LLC to disclose the result of the credit report to the Owner of the rental property to which applicant is applying for and his/her licensed representative for the purpose of evaluating the applicants ability to perform under the rental agreement.

Applicant's Signature: _____ Date ____ / ____ / ____

Please mail completed rental application, a photocopy of your driver's license or state issued ID, and a \$25 check payable to JoHelen, LLC for the rental application fee to:

**Stasia Paszkiewicz
JoHelen LLC
711 N. Donnelly St # 1895
Mount Dora, FL 32756**

**For inquires about application status only, please contact Stasia Paszkiewicz at:
stasia@operahouseapartmentsdeland.com**