| Property Location You Are Applying For:  HASTINGS USA, LLC.  1990 Lake Avenue SE Largo, FL 33771  Phone 727-584-2093 Fax 727-584-4754 |                                           |           |                           |                      |         |                  |       |  |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------|---------------------------|----------------------|---------|------------------|-------|--|--|--|
| Applicant Name                                                                                                                        | e                                         |           |                           |                      |         |                  |       |  |  |  |
| Last                                                                                                                                  | First                                     | MI        |                           | Date of Birth        |         | Social Securi    | ty#   |  |  |  |
| Driver's License                                                                                                                      | # State Issue                             | ed Home   | Phone                     | Work I               | Phone   |                  |       |  |  |  |
| Current Address                                                                                                                       | Apt                                       | . #       | City                      |                      | State   | Zip              |       |  |  |  |
| Lived at Present                                                                                                                      | Address Since                             |           | Reasor                    | n for Moving         |         | Email addres     | S     |  |  |  |
| Landlord's Name                                                                                                                       | Landlord's Name Phone Current Rent Amount |           |                           |                      |         |                  |       |  |  |  |
| Employment Inf                                                                                                                        | ormation (Includ                          | de wages, | pension                   | s, alimony, an       | d any o | ther form of inc | come) |  |  |  |
| Present Employe                                                                                                                       | er Ado                                    | Iress     |                           | Phone                |         |                  |       |  |  |  |
| Job Title Supervisor's N                                                                                                              |                                           |           | Name Length of Employment |                      |         |                  |       |  |  |  |
| Vehicle Informa                                                                                                                       | tion                                      |           |                           |                      |         |                  |       |  |  |  |
| Automobile Ma                                                                                                                         | oile Make Model                           |           | Year                      | Year License Plate # |         |                  |       |  |  |  |
| Motorcycles (oth                                                                                                                      | er vehicles)                              |           |                           |                      |         |                  |       |  |  |  |
| Banking Information                                                                                                                   |                                           |           |                           |                      |         |                  |       |  |  |  |
| Name of Bank                                                                                                                          | Address                                   |           | City                      | State                |         |                  |       |  |  |  |
| Checking Account # Savings Account #                                                                                                  |                                           |           |                           |                      |         |                  |       |  |  |  |
| Occupant Information Number of Occupants (Including yourself) Adults: Children:                                                       |                                           |           |                           |                      |         |                  |       |  |  |  |
| 01:11:11                                                                                                                              | D ( (D)                                   |           |                           | 01 11 11 11          |         | D ( (D) (        |       |  |  |  |
| Child's Name                                                                                                                          | Date of Bir                               | tn 55#    |                           | Child's Name         |         | Date of Birth    | 55#   |  |  |  |
| Emergency Contact Name                                                                                                                |                                           |           | Phone                     |                      |         | Relationship     |       |  |  |  |
| Address                                                                                                                               | City                                      | ,         |                           | State                |         | Zip              |       |  |  |  |

| How did you find out about the                                                                                                                                                                                                                                                                                                                           |                                                                                                                              |                                                                                                                                                                        |                                                                                                                                |                                                                                                                                                                                                               |  |  |  |  |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|
| Have you ever been evicted                                                                                                                                                                                                                                                                                                                               | or asked to r                                                                                                                | move?                                                                                                                                                                  |                                                                                                                                |                                                                                                                                                                                                               |  |  |  |  |  |  |
| Have you ever filed bankrup                                                                                                                                                                                                                                                                                                                              | tcy?                                                                                                                         | do.an.O                                                                                                                                                                |                                                                                                                                |                                                                                                                                                                                                               |  |  |  |  |  |  |
| Have you over been arrested                                                                                                                                                                                                                                                                                                                              | Have you ever filed bankruptcy?If yes, when?If yes you ever been arrested?If yes, when?If yes, when?                         |                                                                                                                                                                        |                                                                                                                                |                                                                                                                                                                                                               |  |  |  |  |  |  |
| If yes, please explain all arre                                                                                                                                                                                                                                                                                                                          |                                                                                                                              |                                                                                                                                                                        |                                                                                                                                |                                                                                                                                                                                                               |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                              |                                                                                                                                                                        |                                                                                                                                |                                                                                                                                                                                                               |  |  |  |  |  |  |
| Det Information                                                                                                                                                                                                                                                                                                                                          |                                                                                                                              |                                                                                                                                                                        |                                                                                                                                |                                                                                                                                                                                                               |  |  |  |  |  |  |
| Pet Information                                                                                                                                                                                                                                                                                                                                          | Brood                                                                                                                        |                                                                                                                                                                        | ٨٥٥                                                                                                                            | Woight                                                                                                                                                                                                        |  |  |  |  |  |  |
| Type of Pet Type of Pet                                                                                                                                                                                                                                                                                                                                  | Breed                                                                                                                        |                                                                                                                                                                        | _ Age<br>Age                                                                                                                   | Weight                                                                                                                                                                                                        |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                              |                                                                                                                                                                        |                                                                                                                                |                                                                                                                                                                                                               |  |  |  |  |  |  |
| Please list any additional info                                                                                                                                                                                                                                                                                                                          | ormation that                                                                                                                | . may alde in the                                                                                                                                                      | e proces                                                                                                                       | ssing or this application.                                                                                                                                                                                    |  |  |  |  |  |  |
| Applicant represents that a correct and hereby authoriverification of the informat credit report, employment, and agrees to furnish additional application is for qualithe applicant that he/she will collect a processing fee ar property and HASTINGS Utenant. Any omissions on to applicant for completion *Non-refundable applications age or older. | izes agent/lation provided, eviction, critional credit<br>lification purvill be offered will accepts about this application. | andlord to cond<br>d including but<br>iminal/civil bac<br>references up<br>rpose only and<br>d this property<br>of more than or<br>its sole discret<br>tion are ground | duct a f<br>t not lir<br>ckgroud<br>on requ<br>does d<br>does d<br>does<br>does<br>does<br>does<br>does<br>does<br>does<br>doe | ull background check and nited to, the obtaining of a nd, sex offender check uest.  not in any way guarantee orize agent/owner to ication on this rental I select the best-qualified enial or may be returned |  |  |  |  |  |  |
| Requested date to start leathis application to sign a leadeposits, before occupant                                                                                                                                                                                                                                                                       | ease agreem                                                                                                                  |                                                                                                                                                                        |                                                                                                                                |                                                                                                                                                                                                               |  |  |  |  |  |  |
| Applicant's Signature:                                                                                                                                                                                                                                                                                                                                   |                                                                                                                              |                                                                                                                                                                        | _Date:                                                                                                                         |                                                                                                                                                                                                               |  |  |  |  |  |  |
| Non-refundable application                                                                                                                                                                                                                                                                                                                               | n processing                                                                                                                 | g fee of \$                                                                                                                                                            | .00                                                                                                                            |                                                                                                                                                                                                               |  |  |  |  |  |  |
| Collected by:                                                                                                                                                                                                                                                                                                                                            |                                                                                                                              |                                                                                                                                                                        | _Date:                                                                                                                         |                                                                                                                                                                                                               |  |  |  |  |  |  |
| How did you hear about us                                                                                                                                                                                                                                                                                                                                | s? Rental M                                                                                                                  | agazine?                                                                                                                                                               |                                                                                                                                | Sign/Drive by?                                                                                                                                                                                                |  |  |  |  |  |  |
| Newspaper/Flyer                                                                                                                                                                                                                                                                                                                                          |                                                                                                                              | Internet?                                                                                                                                                              |                                                                                                                                | Other?                                                                                                                                                                                                        |  |  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                              |                                                                                                                                                                        |                                                                                                                                |                                                                                                                                                                                                               |  |  |  |  |  |  |

Applicant Information (All applicants age 18 or older must complete an application). PLEASE FILL OUT COMPLETELY. Incomplete applications will not be considered.