



Lot/Apt. Address _____

Office Date Stamp: _____

BACKGROUND APPLICATION

Instructions Complete all blanks or write n/a. Attach copies of your driver's license/passport, income information, pet documents (if applicable), and a **\$100 non-refundable application/background check fee** (check or money order **ONLY** to Tropic Isles Co-op, Inc.) By State Statute, unmarried applicants must fill out separate applications and pay a separate fee. Applicants renting from a private resident will only have a criminal background check conducted. Residency is restricted to applicants age 55+ or those reaching 55 within a year of this application; a spouse or other occupant must be at least 40. Processing Timeline Normal processing takes 5 to 7 business days. Applications requiring review by the Board of Directors may take an additional 5 to 7 business days. Applicants will be notified by the office when the application process is complete.

Application is for a: <input type="checkbox"/> Share Purchase <input type="checkbox"/> Home Purchase <input type="checkbox"/> Apartment <input type="checkbox"/> Home Rental				
<input type="checkbox"/> RV Space Rent 90+ days <input type="checkbox"/> Other				
• List your <i>Realtor, Seller or New Landlord</i> : _____				
• How did you hear about Tropic Isles? _____				
_____	_____	_____	_____	____/____/____
Applicant Last Name	First	Middle	SS#	DOB mo./day/yr.
_____	_____	_____	_____	____/____/____
Spouse Last Name	First	Middle	SS#	DOB mo./day/yr.
_____	_____	_____	_____	____/____/____
Applicant Driver's License #	State	Spouse License #	State	()-__-__ Telephone/Cell #
_____	_____	_____	_____	____/____/____
Email Address	Other Occupant Name	Relationship	SS#	DOB mo./day/yr.
_____	_____	_____	_____	____/____/____
Current Address	City	State	Zip	Landlord/ Mortgage
From Date: ____/____/____		To Date: ____/____/____		\$ ____ month
_____	_____	_____	_____	____/____/____
Previous Address	City	State	Zip	Landlord/ Mortgage
From Date: ____/____/____		To Date: ____/____/____		\$ ____ month
Answer the following questions...				
		Have You: or your Spouse ever:		
1.	Had an eviction filed or left owing money to an owner or landlord?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2.	Applied for Residency in the past two years but did not move in?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3.	Had an adjudication withheld or been convicted of a crime?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
If you (or your spouse) answered "Yes" to the above, please briefly explain:				
<input type="checkbox"/> attached additional comments				



Lot Address: _____

_____	_____	_____	_____	()-__-____
Emergency Contact Name	Address	City, State, Zip	Relationship	Telephone/Cell#
Pet Owners Complete below:				
1. _____	_____	_____lbs.	_____	2 pets up to 30 lbs. ea. allowed w/Vet records
2. _____	_____	_____lbs.	_____	
Pet Name(s)	Breed	Weight	Age/DOB	
<i>Note: Renters of Homeowners/Shareholders Skip to the "Signature Authorization" section*</i>				
_____	_____	_____	_____	_____
Applicant Employer	Address	City, State, Zip	Telephone	Position
Dates Employed: _____	____/____/____	____/____/____	\$ _____	\$ _____
Retired? <input type="checkbox"/> Yes <input type="checkbox"/> No	From _____	To _____	Salary monthly \$ _____	Other Income mo. \$ _____
	Pension/month \$ _____	Social security/mo. \$ _____	Other Income mo. \$ _____	Total Income mo. \$ _____
_____	_____	_____	_____	_____
Spouse Employer	Address	City, State, Zip	Telephone	Position
Dates Employed: _____	____/____/____	____/____/____	\$ _____	\$ _____
Retired? <input type="checkbox"/> Yes <input type="checkbox"/> No	From _____	To _____	Salary monthly \$ _____	Other Income mo. \$ _____
	Pension/month \$ _____	Social security/mo. \$ _____	Other Income mo. \$ _____	Total Income mo. \$ _____
<p>*Signature/Authorization - Release of Information Applicant(s) represents that all of the above information and statements are true and complete, and hereby authorizes a consumer report investigation including, but not limited to, a history of records for residential (rental or mortgage), employment, criminal, court, and credit, as applicable. This application must be signed before it can be processed. Applicant acknowledges that false or omitted information herein may constitute grounds for rejection of this application, termination of right of occupancy, and forfeiture of fees or deposits and may constitute a criminal offense under the law:</p>				
_____	____/____/____	_____	____/____/____	
Applicant Signature	Date	Co-applicant Signature	Date	
Application Checklist:	<input type="checkbox"/> Signature of each applicant	<input type="checkbox"/> Driver's licenses or passports copies	<input type="checkbox"/> \$100 application fee	<input type="checkbox"/> Copies Vet, vaccinations, and photo
<input type="checkbox"/> Income Verification (i.e. copies of bank, pension, social security, tax, and/or payroll documents).	<input type="checkbox"/> Other _____			
Will you be a part time resident? <input type="checkbox"/> Yes <input type="checkbox"/> No Full time resident? <input type="checkbox"/> Yes <input type="checkbox"/> No				

Updated 07,2017