



PALM BAYOU APARTMENTS (Non-Smoking Complex)

5006, 5026, 5046 – 1ST Street North

St. Petersburg, FL 33703

- **Must be income eligible. Minimum monthly gross household income to qualify:**

1 bedroom	\$925.00 per month	\$2,312.00 gross income monthly
2 bedroom	\$1,050.00 per month	\$2,625.00 gross income monthly

- Credit and background screening approval required including but not limited to:
 1. Pay any balances owed to any federally funded housing program.
 2. No evictions or negative lease terminations from any Lessor in the last 5 years.
 3. Satisfactory credit and previous Landlord reference.
 4. A criminal background check will be performed on all applicants. Applicants who have a record of criminal activity that threatens the life, health, safety, possessions, or right to peaceful enjoyment of other residents, or drug-related criminal activity are not eligible for occupancy, at the Landlord's sole discretion.
- Monthly rent includes: water, garbage, lawn-care, and pest control
- Tenant pays electric (required). Other utilities are at tenant's option with Landlord approval.
- Laundry facility on property
- Pets allowed (with restrictions and pet fee)
- No smoking in the apartment or in the common areas. Smoking allowed **only in designated smoking area. Strictly enforced.**
- Application fee \$50.00 money orders only (non refundable)
- 1st month rent and security deposit due at move in. No personal checks accepted. Security deposit = one month rent. Pet Fee: \$100.00

WHEN RETURNING THIS COMPLETED APPLICATION, PLEASE INCLUDE THE FOLLOWING INFORMATION FOR EACH APPLICANT AND MAIL OR DROP OFF ALL DOCUMENTS TO THE MANAGEMENT OFFICE. YOUR APPLICATION WILL NOT BE PROCESSED WITHOUT THE \$50.00 APP FEE.

1. Copy of Social Security Card
2. Copy of Photo ID (everyone 18+ years of age)
3. Current documentation from source of all income verifying amounts (job, Social Security, child support, etc). For employment, please turn in a full 2 month of paystubs and the last 6 bank statements.

Mail only to : **St. Petersburg Housing Authority**
2001 Gandy Blvd North
St. Petersburg, FL 33709



<u>BEDROOM SIZE</u>	
1	2
(Please circle one)	

PALM BAYOU APARTMENTS APPLICATION

Each applicant must complete an application

Full Name _____ Phone # _____

Date of Birth _____ SS# _____ Alt Phone # _____

Email Address: _____

Present Address _____

Street City State Zip

Why are you moving _____

Number of pets _____, What type _____

FAMILY COMPOSITION: List all persons who will live in the apartment, including live-in attendants who are necessary for the care of a family member. You must fill out each box for each person.

	Last Name	First Name	Social Security #	Relation to primary Lessee	Gender	Date of Birth
1				HEAD		
2						
3						
4						
5						

Income Information:

Source of Income	Frequency paid (circle one)			Gross Income Amount
Employment/Job	Monthly	Weekly	Bi-Weekly	\$
Social Security / SSI	Monthly	Weekly	Bi-Weekly	\$
Child Support	Monthly	Weekly	Bi-Weekly	\$
TANF	Monthly	Weekly	Bi-Weekly	\$
Pension	Monthly	Weekly	Bi-Weekly	\$
Other (Explain)	Monthly	Weekly	Bi-Weekly	\$

--	--	--

Rental/Residence Information:

	Current Residence	Previous Residence
Street Address		
City		
State and Zip		
Last Rent Amount Paid		
Owner/Manager Name & Phone Number		
Reason for Leaving		
Did you give notice?		
Do you owe a balance?		
	From/To	From/To
Dates of Residency		

General Information:

Are you currently receiving Section 8 housing assistance _____ Agency Name: _____

Have you ever been evicted _____ If yes, when _____ From where _____

Have you ever been involved in any lease-related litigation YES _____ NO _____ If yes, describe

Describe any rental agreement you have abandoned _____

Have you or any proposed occupant ever been convicted of a crime or entered into a pre-trial intervention agreement for purposes of adjudication withheld? _____ If yes, describe _____

Emergency Contact Information:

Name: _____ Phone # _____

Address: _____ Relationship: _____

Name: _____ Phone # _____

Address: _____ Relationship: _____

Name: _____ Phone # _____

Address: _____ Relationship: _____

CERTIFICATION OF CORRECT INFORMATION: Applicant certifies that all information provided in this application is correct. If a lease is executed with applicant and the landlord subsequently learns that incorrect information was given or pertinent information was omitted, the lease may be terminated at landlord's option. If you are applying to lease an apartment with other persons, each adult must complete an application. Additional application fees may be incurred.

VERIFICATION AUTHORIZATION: Applicant authorizes the Landlord, St. Petersburg Housing Authority and/or RISE Development Corporation or its subsidiary, to investigate his or her credit, employment, current or previous housing, criminal history, and any other information pertinent to applicant's ability to pay rent and comply with the terms of the lease. Applicant authorizes Landlord to release leasing information, lease compliance and payment history to others.

SECURITY DEPOSIT/APPLICATION FEE: Approved applicant(s) must pay the required security deposit (equal to one month's rent) and the first month's rent along with a pet deposit of \$100, if applicable, prior to move in. Pets must be approved by Landlord, see Rules & Regulations. If applicant and any co-applicants are approved but do not enter into a lease, the security deposit will be refunded. A non-refundable application fee of \$50.00 is due with the completed application. You understand and acknowledge that the application fee is non-refundable to cover the cost of processing your application and you are not entitled to a refund even if you are not approved for leasing an apartment.

Signatures must be notarized unless signed in front of SPHA office staff.

Applicant Signature

Date

Co-Applicant Signature

Date

SPHA MANAGEMENT USE ONLY

Application Rec'd by _____ Date Rec'd _____

Application Fee Paid _____ Money Order # _____

Apt # _____ BR size _____ Move In Date _____ Monthly rent _____

Security Deposit _____ Pet Deposit _____ **Amount Paid at move in** _____

Approved _____ Not Approved _____ Manager's Signature _____

Reason for denial: _____

Applicant notified by _____ Date _____ Comments _____