

1080 Cypress Parkway, PMB 443 Kissimmee Florida 34759

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DET ADDLICATION

| DATE: | PET APPLICATION FEE PAID? YES / NO: | |
|---|-------------------------------------|---|
| ALL OF THE | FOLLOWING INFORMATION | N MUST BE COMPLETED |
| This pet application will be applied for t | he property located at: | |
| I do hereby request that my pet be app | roved to reside with me during | g the term of my lease agreement. |
| Breed: | d: Name: | |
| Sex: | Age: | Weight: |
| · | | (If yes, you must provide proof) must complete a separate pet application) |
| In consideration o | f processing this pet application | on, I ATTEST TO THE FOLLOWING: |
| 1. I will provide a picture of my pet. | | |
| 2. My pet is well-trained and not danger pet does not bark excessively. No other | • • | |
| 3. My pet is not pregnant and will not be be considered in violation of this agreem incur additional pet fees as defined in the | nent and at the owners option, | dency. If my pet becomes pregnant, I will must immediately remove the pet or |
| 4. If my pet cause damages/destruction and destruction. If there are any false state terms of this application, then the latenancy. | atements, mis-statement or if r | |
| 5. I understand my pet fee will be refund refundable under any circumstance and there is a \$150.00 non-refundable pe | will NOT be applied toward an | f approved, the pet application fee is not y other application. I also understand |
| | | |

DATE:

APPLICANT SIGNATURE