Hammock Estates ROC, Inco
A CORPORATION NOT-FOR PROFIT
A 55+ COMMUNITY

New Resident Application and Release form

I hereby authorize your company, or any agent of your company, to contact any of my references, previous employers, companies, credit bureaus, corporations, law enforcement agencies, persons and educational institutions, to supply any information concerning my background and criminal History. I also hereby release any of the above from liability and responsibility arising from their doing so. Applicant acknowledges that false information herein may constitute ground for rejection of this application, termination of right of occupancy and/or forfeiture of deposit and may constitute a criminal offence under the laws of this state. I believe to the best of my knowledge that all information I/we have provided is accurate and that I fully understand the terms of this release.

Photocopies of this authorization form may be made to facilitate multiple inquires. In the event you do receive a photocopy of this authorization, it should be treated as an original and the requested information should be released to facilitate my/ our application for residency.

SUBMIT A COPY OF ONE or THE FOLLOWING: Birth Certificate ( ) State Photo ID ( ) Drivers License ( ) Passport ( ) Immigration Card ( )

Applicant Last Name:_____ First: _____ MI: _____

Street Address: _____

City/ State/ Zip _____

Home Phone # _____ cell Phone # _____

Social Security ## _____-_____-_____ Date of Birth _____/_____/_____

Race _____ Sex _____ Drivers License # _____

Have you ever been arrested for a felony? _____ Have you ever been convicted of a felony? _____

Applicant Signature: _____ Date _____

E-Mail _____

CO-Applicant Last Name: _____ First_____ MI _____

Social Security # _____-_____-_____ Date of Birth _____/_____/_____

Race: _____ Sex: _____ Drivers License # _____

Have you ever been arrested for a felony? _____ Have you ever been convicted of a felony? _____

Co-Applicant Signature: _____ Date:_____/_____/____

E-Mail _____

Application fee: *$150 check or money order upon submission of your application. (cash or credit cards not accepted). Payable to Central Florida CAM Services. Application will NOT be accepted or processed without the application fee.*

Hammock Estates ROC, Inc

3026 Roger St.
Sebring, Fl 33872
863-382-0347

Acknowledgement of Prospectus, By-Laws and Rules

I, _____ future resident of Hammock Estates ROC, Inc. at

_____ acknowledge that I have read and

(Park Address)

understand the Prospectus, By-Laws and Rules for Hammock Estates ROC, Inc.

_____ _____

Print Name Print Name

_____ _____

Signature Signature

_____ _____

Date Date

PROFESSIONAL SCREENING SERVICES

REPORT REQUEST FORM

DATE _____

COMPANY NAME **Hammock Estates ROC, Inc.**

PERSON REQUESTING INFORMATION Diana Gonzalez, Manager

****

Full Name: _____

Address: _____

_____

SS Number: _____

Date of Birth: _____

Race: _____ Sex: _____

Driver's License Number & State: _____

Comments: _____

****

OFFICE

Please order the following reports:

☐ Comprehensive Criminal History - List States _____

☐ Felony Only Criminal History - List States _____

☐ Statewide Florida Criminal Database Search ☐ Multi-State Criminal Search

☐ County Criminal History - City _____ State _____ County _____

☐ Federal Criminal Search

☐ County Eviction. List City or County and State _____

☐ Credit Report ☐ Social Security Number check ☐ Sexual Offender Search: State ____ National ____

☐ Employment Reference Check (Reference information required on a separate sheet.)

☐ Residency Reference Check (Reference information required on a separate sheet.)

☐ Full Screening Package (Application required) with: Multi-State ____ Full Criminal ____ Criminal Database ____

☐ Partial Screening Package (Application required)

☐ Economy Screening Package with: Criminal Database _____ Full Criminal _____ Multi-State _____

996 Westwood Square, Suite 2, Oviedo, FL 32765
Phone 407-423-8766 or 407-706-6910
Fax 407-425-8433 or 407-706-6899
www.professionalscreening.com