



**To Apply for Residency:**

Complete Fillable Form on Website

EMAIL TO: [windemere@flynnmanagement.com](mailto:windemere@flynnmanagement.com)

FAX TO: **352-728-0970**

MAIL OR HAND DELIVER TO:

**Windemere Villas  
Leasing Office  
1416 Griffin Road  
Leesburg, FL 34748**

**If you have questions, please call the Leasing Office  
at 352-728-5444**



**Application Fees:**

**\$75 per Individual**  
**\$100 Per Married Couple with joint credit**  
**\$20 for Age 55+ (Individual or Married) \*\*\***

**Security Deposits:**

**One Bedroom     \$ 350**  
**Two Bedroom     \$ 450**

**Rents Starting at:**

**(12 month lease)**  
**One Bedroom \$675\***  
**Two Bedroom \$775\***

**Nonrefundable Pet Fee:**

**\$400**  
**Seniors 55+ \$100**

**\*Rents vary due to location, amenities and upgrades and include maintenance, water, sewer, and trash and pest control.**

**Additional Deposits May Be Required**  
**Fees and Deposits may be paid with Credit Card, Money Order or Personal Check**

**Please contact our Leasing Office with Questions**



## HELPFUL HINTS FOR COMPLETING THE APPLICATION FOR RESIDENCY AT WINDEMERE VILLAS

- Please write neatly. Complete all sections of your application. **PLEASE REMEMBER TO SIGN AND DATE YOUR APPLICATION.**
- Please use the word “NONE” instead of “N/A” for all sections that do not apply to you. When your application is completed, please initial the bottom of each page.
- Please include all addresses for places you’ve lived in the past 3 years. Use extra paper if necessary.
- Each person listed on the application must provide a government issued ID and social security card if available.
- If paying by check or money order, please write one check for the application fee and a separate one for the security deposit or wait list deposit. **Please contact our leasing staff for current application fees and deposit information.**
- Please make all checks payable to Windemere Villas. We also accept credit cards (convenience fee applies) for payment. Please contact the Leasing Office for a credit card authorization form.
- If you are over 55 and a member of AARP, include a copy of your membership card, as this will entitle you to a \$250 discount off the first month’s rent. This discount may not be used in conjunction with any other discounts/specials.
- Please sign and return the APPLICANT’S AUTHORIZATION TO RELEASE INFORMATION form along with your completed application.
- **WAIT LIST APPLICANTS:**  
The Deposit for the Wait List is \$100. As above, please write two (2) separate checks, one application fee and one for the \$100 Wait List Deposit. When you actually choose your apartment, the \$100 deposit will be applied toward the Security Deposit required for that apartment. The \$100 Wait List Deposit will be refunded upon request should you decide not to move to Windemere Villas.

PLEASE CALL US IF YOU HAVE ANY QUESTIONS. WE’LL BE HAPPY TO HELP YOU.

Sincerely,  
The Staff at Windemere Villas. (352-728-5444)



**APPLICATION FOR RESIDENCY**

APPLICANTS	First Name	MI	Last Name	Social Security No.
Name of Applicant/ Head of Household				
___ Spouse or ___ Other Applicant				

Please list all others who will occupy the apartment. Persons 18 years old and older must complete a separate application.

#	First Name	MI	Last name	Date of Birth	Social Security No.	Relationship
1						
2						
3						

Identification	Applicant	Spouse or Other Applicant
Date of Birth		
Driver's License (State & No.)		
Other Identification (Photocopy)		

Please list all vehicles you plan to park on the property.

Vehicles	Applicant	Spouse or Other Applicant
Vehicle Year, Make & Model		
Vehicle License (State & No.)		
Vehicle Body Type, Color		
Registered in name of		

Windemere Villas is a Deed Restricted Community. Motorcycles, trucks, trailers, Recreational Vehicles, Commercial Vehicles, Vans, etc. are not permitted. Acknowledged: \_\_\_\_\_ (Initial)

Pets	Applicant	Spouse or Other Applicant
Pet's Name		
Pet Kind, Breed		
Pet Weight (Pounds)		

<b>Current Residency</b>	<b>Applicant</b>	<b>Spouse or Other Applicant</b>
<b>Daytime Telephone Number (Area Code and No.)</b>		
<b>Mobile Telephone Number (Area Code and No.)</b>		
<b>Street Address and Apt. No.</b>		
<b>City, State, Zip</b>		
<b>Name of Apt. Complex/Mort. Co.</b>		
<b>Name of Manager</b>		
<b>Telephone No. Landlord/Mort. Co.</b>		
<b>Date Moved In</b>		
<b>Monthly Payment</b>		
<b>Why do you wish to move?</b>		

<b>Prior Residency</b>	<b>Applicant</b>	<b>Spouse or Other Applicant</b>
<b>Street Address and Apt. No.</b>		
<b>City, Street, Zip</b>		
<b>Name of Apt, Complex/Mort. Co.</b>		
<b>Name of Manager</b>		
<b>Telephone No. Landlord/Mort. Co.</b>		
<b>Date Moved In</b>		
<b>Date Moved Out</b>		
<b>Monthly Payment</b>		
<b>Why did you move?</b>		

<b>Current Employment</b>	<b>Applicant</b>	<b>Spouse or Other Applicant</b>
<b>Name of Employer</b>		
<b>Address of Employer</b>		
<b>City, State, Zip</b>		
<b>Name of Supervisor or Manager</b>		
<b>Telephone Number of Employer</b>		
<b>Date Started Employment</b>		
<b>Position</b>		
<b>Monthly Income</b>		
<b>Other Income Source</b>		
<b>Monthly Amount</b>		
<b>Total Annual Income</b>		

Contact in Emergency	Applicant	Spouse or Other Applicant
Name		
Relationship		
Telephone (Area Code & No.)		
Street Address		
City, State, Zip		

Additional Contact	Applicant	Spouse or Other Applicant
Nearest Relative (Blood)		
Relationship		
Telephone (Area Code & No.)		
Street Address		
City, State, Zip		

Do you have other income, or are there other circumstances of which we should be aware in processing your application?

### Unit Desired

Size Apt. Desired ( List order of preference)	<input type="checkbox"/> One Bedroom <input type="checkbox"/> Two Bedroom
Date you would like move into the Apt.	___/___/20___    ___ As soon as possible

### Fair Housing

In accordance with Federal fair housing laws it is illegal to discriminate against any person because of race, color, religion, sex, handicap, familial status or national origin in connection with the rental of most housing. The federal agency which administers compliance with this law is the U. S. Department of Housing and Urban Development.

### Equal Credit Opportunity Act

The federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of sex or marital status. The federal agency which administers compliance with this law is the U. S. Equal Credit Opportunity, Federal Trade Commission.

## Application Fee

Applicant has submitted the sum of \$ \_\_\_\_\_ which is a non-refundable payment for the processing of this application. The application fee is not a rental payment or security deposit.

## Security Deposit

Applicant has submitted the sum of \$ \_\_\_\_\_ which is payment of the security deposit for an apartment. If for any reason the application is declined by management, the security deposit will be refunded in full. If the application is approved and applicant fails to occupy the premises on the agreed upon date, except due to delay caused by construction or the holding over of a prior resident, applicant will forfeit the security deposit. Applicant understands and agrees that if applicant cancels more than 72 hours after the submission of the application to management, the security deposit will be forfeited.

## Permission to Release Information

I warrant and represent that the information submitted on this application is true and correct. I understand that any false information will constitute grounds for rejection of the application. I hereby authorize the release of all credit, income and rental/mortgage information to the agents and/or employees of Flynn Management Corporation. I understand that the lease agreement will not become effective until this application is approved by management.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Spouse/Co-Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Email

\_\_\_\_\_  
Spouse/Co-Applicant Email

Submit completed application form, authorization form, application fee and deposit by mail to:

Windemere Villas Apartments  
1416 Griffin Road  
Leesburg, FL 34738

OR

Fax: 352-728-0970 or  
Email: [windemere@flynnmanagement.com](mailto:windemere@flynnmanagement.com)  
Questions? Call 352-728-5444



**APPLICANT’S AUTHORIZATION TO RELEASE INFORMATION**

I hereby authorize Flynn Management Corporation to verify my past and present employment, including earnings records, income records, bank accounts, stock holdings, criminal history and any other items needed to process my apartment application and during my residency.

I further authorize Flynn Management Corporation to order a consumer credit report and verify other credit information, including past and present mortgage and landlord references and payment history.

It is understood a photocopy or fax copy of this form will also serve as authorization.

\_\_\_\_\_  
Applicant’s Signature

\_\_\_\_\_  
Co-Applicant’s Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Print Name





**RESIDENT SELECTION POLICY**

**ADOPTED SEPTEMBER 18, 2017**

**WE DO BUSINESS IN ACCORDANCE WITH THE FEDERAL FAIR HOUSING LAW**

It is illegal to discriminate against any person because of RACE, COLOR, RELIGION, SEX, HANDICAP, FAMILIAL STATUS or NATIONAL ORIGIN.

1. Two years or more good rental history (or home ownership) will be verified.
2. If relying on employment income, you must be continuously employed six months or more at the same local job. The income must be wage or salary. Tips, commissions or bonuses should not be included unless the employer can verify the income.
3. Income from sources other than employment (i.e. interest income, financial assets, social security, pension, or self-employment income) shall be verified. Sufficient third party documentation is required.
4. Net income should be three times the market rent.
5. Good credit must be established including acceptable **Beacon Score of 660** or higher or other credit rating. Any history of failure to pay legal obligations such as child support, alimony, obligations owed to governmental entities, rent payments, mortgage payments, car loans, and similar obligations may be considered by us when screening your application
6. If employment or income is not sufficient, or good credit cannot be verified, or housing history is insufficient, applicants may be qualified by paying one or more extra months rent in advance.
7. Verification using government identification or a birth certificate or other generally accepted forms of identification containing the birthdates for each household member must be provided.
8. Student households are not permitted. A student household is one in which any permanent resident or occupant over 18 years old is enrolled full or part-time in a university, college, community college, or other institution of higher education. Part-time shall mean no more than 10 credit hours a semester, or enrolled five months a year.
9. All applicants must comply with the rules of the community including pets, vehicles, etc.

10. Size Apartment	Maximum Number of Occupants	Maximum Number of Adults
One Bedroom	2	2
Two Bedroom	4	3

\*Maximum number of unrelated adults in any unit is 2.

11. If we obtain a criminal history report on you as part of the process of screening your application, please be advised that we consider information contained in such reports on a case-by-case basis as part of our effort to provide a safe environment not only for our residents and their family members, guests and items of property but also for the members of our management staff who work in the apartment community. Specifically, we consider the nature and severity of any criminal conviction identified in the report and the amount of time that has passed since the criminal conduct occurred. By way of illustration only, convictions for crimes involving injury to person or property; bodily harm to or molestation of a minor; any act which places the offender on a sex offender registry; manufacture, distribution or sale of illegal controlled substances; or any act which constitutes a threat to the health or safety of other individuals, results in substantial physical damage to the property of others, or interferes with the peaceful and quiet enjoyment of residential premises likely will constitute grounds for rejection of an application for housing, depending upon when the conviction occurred.

Upon **written** request, reasonable accommodations and modifications will be provided to applicants and residents with disabilities if the accommodation/modification does not create an undue financial and administrative burden or a fundamental alteration of the program.

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Name \_\_\_\_\_ Date \_\_\_\_\_ Name \_\_\_\_\_ Date \_\_\_\_\_

**CREDIT CARD AUTHORIZATION FORM**

Property Name: Windemere Villas Apartments

Resident/Applicant Name: \_\_\_\_\_

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\_\_\_\_\_ Rent \$ \_\_\_\_\_

\_\_\_\_\_ Security Deposit \$ \_\_\_\_\_

\_\_\_\_\_ Application Processing Fee \$ \_\_\_\_\_

\_\_\_\_\_ Other \$ \_\_\_\_\_

\_\_\_\_\_ Convenience Charge\*\* \$ \_\_\_\_\_

**\*\*Amt. charged up to \$500 - \$15.00  
Over \$500 - \$25.00**

**Total Amount to be Charged \*\*Must include \$15 or \$25  
Convenience Charge in order to process application\*\*** \$ \_\_\_\_\_

**Type of Credit Card: Please check one.**

Master Card \_\_\_\_\_ Visa \_\_\_\_\_ Discover \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

CVV2 (3 digit code on back of card): \_\_\_\_\_  
\_\_\_\_\_

Cardholder First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Cardholder Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number with area code: \_\_\_\_\_  
\_\_\_\_\_

By signing below, I authorize Flynn Management Corporation to charge the above credit card in the amount listed as "Total Amount to be Charged." **This charge will appear on your credit card statement as Flynn Management Corporation.** I certify that I am the cardholder of the above referenced credit card and have the authority to complete this transaction.

\_\_\_\_\_  
Cardholder signature

\_\_\_\_\_  
Date

Fax to: 727-754-8468

Attn: Mary Jane Lucas