



**JACKSONVILLE CRIME FREE  
MULTI-HOUSING PROGRAM  
(JCFMHP)  
APPLICATION and AGREEMENT**



Community Name: \_\_\_\_\_

Address: \_\_\_\_\_ EMail: \_\_\_\_\_

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

Telephone #: \_\_\_\_\_ Fax: \_\_\_\_\_

Number of units: \_\_\_\_\_ Occupancy rate: \_\_\_\_\_ Average monthly rent: \_\_\_\_\_

Number of evictions in last 12 months: \_\_\_\_\_

Manager's Name: \_\_\_\_\_

Address: \_\_\_\_\_ EMail: \_\_\_\_\_

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

Telephone #: \_\_\_\_\_ Cell: \_\_\_\_\_

Management Company: \_\_\_\_\_

Address: \_\_\_\_\_ EMail: \_\_\_\_\_

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

Telephone #: \_\_\_\_\_ Cell: \_\_\_\_\_

Courtesy Officer's Name: \_\_\_\_\_

Address: \_\_\_\_\_ EMail: \_\_\_\_\_

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

Telephone #: \_\_\_\_\_ Cell: \_\_\_\_\_

*The Crime Free Multi-Housing Training is provided by the Jacksonville Police Department and is intended to foster livable and safe neighborhoods through the Property Manager's involvement in order to reduce illegal drugs and criminal activity in the community. The training should not be regarded as legal advice or a replacement for the Property Manager's responsibility to be familiar with the laws of managing property. I release the City of Jacksonville, its employees, and the Jacksonville Police Department from all liability and responsibility from my participation in the CFMHP and in the way I choose to manage my property.*

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_