## APPLICATION TO RENT

(all sections must be completed – we cannot process an illegible application) Individual applications required from each proposed occupant 18 years of age or older

## APPLYING FOR: Apt No. \_\_\_\_\_ Located at \_\_\_\_\_ Rent Amt \_\_\_\_ Per \_\_\_\_ How did you hear about rental? Desired Move-In Date: Last Social Security #: Driver's License: State:\_\_\_\_\_ License#:\_\_\_\_ Email Address: LIST ALL ADDITIONAL OCCUPANTS WHO WILL RESIDE IN UNIT (attach additional page if necessary) \_\_\_\_\_Date of Birth:\_\_\_\_\_ Name: \_\_\_\_\_\_Date of Birth:\_\_\_\_\_ Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ RENTAL HISTORY 1. Current Address: \_\_\_\_ Owner/Manager: \_\_\_\_\_\_Tel: \_\_\_\_\_\_Reason for leaving: \_\_\_\_\_ 2. Previous Address: \_\_\_\_ Unit # City Street State Zip How Long? From (Month/Year): \_\_\_\_\_ To: \_\_\_\_ Rent Paid: \_\_\_\_ Owner/Manager: \_\_\_\_\_\_Tel: \_\_\_\_\_\_Reason for leaving: \_\_\_\_\_ Street Unit # City How Long? From (Month/Year): \_\_\_\_\_ To: \_\_\_\_ Rent Paid: \_\_\_\_\_ State Zip Owner/Manager: \_\_\_\_\_\_Tel: \_\_\_\_\_\_Reason for leaving: TOTAL MONTHLY INCOME 1. Current Employment \_\_\_\_\_ Address: \_\_\_\_\_ Company Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Occupation: \_\_\_\_ \_\_\_\_\_ Monthly Income: \$\_\_\_\_\_ Dates of Employment - From: \_\_\_\_\_\_To: \_\_\_\_\_To: Name of Supervisor: \_\_\_ 2. Previous Employment Company Name: Phone: \_\_\_\_\_ Occupation: \_\_\_\_ Monthly Income: \$ Name of Supervisor: Dates of Employment - From: To: 3. Other Income Monthly Amount\_\_\_\_\_Source \_\_\_\_\_ Monthly Amount\_\_\_\_\_ Source ADDITIONAL INFORMATION - Have you or any of the additional occupants listed above: 1. Are you a veteran? ☐ Yes ☐ No 2. Had any credit problems? ☐ Yes ☐ No 3. Had an unlawful detainer filed against you? ☐ Yes ☐ No 4. Had an unlawful detainer judgment against you? ☐ Yes ☐ No 5. Filed for bankruptcy in the last ten years? Yes No If yes when\_\_\_\_\_\_ 6. Ever used other names? ☐ Yes ☐ No If yes: How many/why? \_\_\_\_\_ List/Explain 7. Been convicted of a felony? ☐ Yes ☐ No 8. Been convicted of a misdemeanor against persons or property? ☐ Yes ☐ No If you answered yes to either question 7 or 8: What and when? (Please attach additional page detailing conviction) Do you have any water-filled furniture (including aguariums) in your residence? ☐ Yes ☐ No

BANKING INFORMATION Name of Bank/S&L/Credit	<b>N</b> : Union:		Branch or Address: _	
Checking #:	Approx. Bal	Savings #:	Approx. Bal	
Name of Bank/S&L/Credit	Union:		Branch or Address:	
	Approx. Bal Savings #: _			
	Credit Cards/Car Payment			
Company Name:		Address/City:		
Account #:	Present Balance:		Monthly Payment:	
Company Name:		Address/City:		
Account #:	Present Balance: Monthly		Monthly Payme	ent:
Company Name:		Address/City:		
Account #:	Preser	nt Balance:	Monthly Payment:	
PERSONAL REFERENC	ES			
Name	Address & City	Phone	Time Known	Relationship
		( )		
EMERGENCY CONTACT	•		·	
Name:	Add	dress:		
			Phone: ()	
VEHICLES				
Year: Make:	Model:	Color:	License#:	State:
Year: Make:	Model:	Color:	License#:	State:
but not limited to, the obtains authorized to obtain a	all of the above statements aining of a credit report, and credit report now and in the above to verify the conter	agrees to furnish additi future. <i>Applicant exp</i>	onal credit references ressly authorizes O	s on request. Owner/Agen
myself including consum character, work habits, pe employers. I understand and private, which main	oplication for rental and/or over, criminal, driving and otlerformance and experience that information will be requestain records concerning maims involving me in insurance	her reports. Employm along with reasons for ested from various fede y past activities relati	nent reports may incler termination of past or eral, state and other ag	ude information as to my employment from previous gencies and entities, public
above mentioned informa	ration, any party or agency c tion and any other informati uesters and suppliers of infol	on related thereto. Fu	irther, I will release from	
or give false information any time furnish information	tatements on this Applicate, I understand that my apon to consumer reporting agoluding both favorable and	plication may be rejected encies and other rental	<b>cted.</b> I understand that I housing owners rega	at the Owner/Agent may a arding your performance o
Date:		Amalia		
LINIALITHODIZES LIGE 55.0	LUDITED	Applicant		
UNAUTHORIZED USE PRO	HIRLED			^

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Notice regarding California Investigative Consumer Reporting Agencies Act				
☐ Property owner does <b>not</b> intent to request an investigative consumer report reg Applicant	arding the			
Unless the box above is checked, Property owner intends to request an investigative consum report regarding the Applicants character, general reputation, personal characteristics, and mode of living. In accordance with California Civil Code Section 1786.22, the files maintained you by the investigative consumer agency shall be made available to you during business ho and on reasonable notice, provided you furnish proper identification, as follows:  (1) You may appear at the investigative consumer reporting agency identified below in personal pers				
Name of Agency				
Address of Agency				
To request a copy of the report(s) that is/are prepared, please check the box below	v:			
$\square$ I would like to receive a copy of the report(s) that is/are prepared				
If the box is checked, Applicant wishes a copy of all reports to be sent by the Owne within three (3) business days of the date such report is provided (California Civil C	-			

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1786.16).



