

Tenant
 Guarantor

Name of Applicant: _____

APPLICATION TO RENT

(All sections must be completed) **Individual applications required from each occupant 18 years of age or older.**

Last Name		First Name		Middle Name		Social Security Number or ITIN	
Other names used in the last 10 years			Work phone number ()		Home phone number ()		
Date of birth		E-mail address			Mobile/Cell phone number ()		
Photo ID/Type		Number		Issuing government		Exp. date	Other ID
1.	Present address			City		State	Zip
	Date in	Date out	Landlord Name			Landlord phone number	
	Reason for moving out					Current rent \$ /Month	
2.	Previous address			City		State	Zip
	Date in	Date out	Landlord Name			Landlord phone number	
	Reason for moving out					Rent at move-out \$ /Month	
3.	Next previous address			City		State	Zip
	Date in	Date out	Landlord Name			Landlord phone number	
	Reason for moving out					Rent at move-out \$ /Month	
Proposed Occupants: List all in addition to yourself	Name		Name				
	Name		Name				
	Name		Name				
Are you a service member? <input type="checkbox"/> Yes <input type="checkbox"/> No							
Do you have pets?	Describe			Do you have a waterbed?	Describe		
How did you hear about this rental?							
A.	Current Employer Name			Job Title or Position		Dates of Employment	
	Employer address			Employer/Human Resources phone number ()			
	City, State, Zip			Name of your supervisor/human resources manager			
	Current gross income			Check one \$ Per <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year			
B.	Prior Employer Name			Job Title or Position		Dates of Employment	
	Employer address			Employer/Human Resources phone number ()			
	City, State, Zip			Name of your supervisor/human resources manager			
	Other income source			Amount \$		Frequency	
	Other income source			Amount \$		Frequency	

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Name of Applicant: _____

Name of your bank	Branch or address	Account Number	Type of Acct

Please list ALL of your financial obligations below.

Name of Creditor	Address	Phone Number	Monthly Pmt. Amt.
		()	
		()	
		()	
		()	
		()	
		()	

In case of emergency, notify:	Address: Street, City, State, Zip	Relationship	Phone
1.			
2.			

Personal References:	Address: Street, City, State, Zip	Length of Acquaintance	Occupation	Phone
1.				
2.				

Automobile: Make: _____ Model: _____ Year: _____ License #: _____

Automobile: Make: _____ Model: _____ Year: _____ License #: _____

Other motor vehicles: _____

Have you ever filed for bankruptcy? _____ Have you ever been evicted or asked to move? _____



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NOTICE REGARDING CALIFORNIA INVESTIGATIVE CONSUMER REPORTING AGENCIES ACT

Landlord does not intend to request an investigative consumer report regarding the Applicant.

Unless the box above is checked, Landlord intends to request an investigative consumer report regarding the Applicant's character, general reputation, personal characteristics, and mode of living. Under Section 1786.22 of the California Civil Code, the files maintained on you by the investigative consumer agency shall be made available to you during business hours and on reasonable notice, provided you furnish proper identification, as follows: (1) You may appear at the investigative consumer reporting agency identified below in person, (2) you may make a written request for copies to be sent by certified mail to a specified addressee, or (3) you may make a written request for a summary of the file to be provided over the telephone. The agency may charge a fee, not to exceed the actual duplication costs, if you request a copy of your file. The agency is required to have personnel available to explain your file to you, and the agency must explain to you any coded information appearing in your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identification. If you are accompanied by a person of your choosing, the agency may require you to furnish a written statement granting permission to the investigative consumer reporting agency to discuss your file in the other person's presence. The agency that will prepare the report(s) identified in this section is listed below:

TRANS UNION
Name of Agency

P.O. Box 340 SPRINGFIELD, PA. 14064
Address of Agency

If you would like a copy of the report(s) that is/are prepared, please check the box below:

I would like to receive a copy of the report(s) that is/are prepared

If the box above is checked, Landlord agrees to send the report to Applicant within three (3) business days of the date the report is provided to Landlord. Landlord may contract with another entity to send a copy of the report.

Applicant represents that all the above statements are true and correct, authorizes verification of the above items, and agrees to furnish additional credit references upon request. Applicant authorizes Landlord to obtain reports that may include credit reports, unlawful detainer (eviction) reports, bad check searches, social security number verification, fraud warnings, previous tenant history and employment history. Applicant consents to allow Landlord to disclose tenancy information to previous or subsequent Landlords.

Landlord will require a payment of \$ 30.00 , which is to be used to screen Applicant.

The amount charged is itemized as follows:

- 1. Actual cost of credit report, unlawful detainer (eviction) search, and/or other screening reports \$ 10.75
- 2. Cost to obtain, process and verify screening information (may include staff time and other soft costs) \$ 19.25
- 3. Total fee charged \$ 30.00

The undersigned Applicant is applying to rent the premises designated as:

Apt. No. _____ Located at _____

The rent for which is \$ _____ per _____. Upon approval of this application, and execution of a rental/lease agreement, the applicant shall pay all sums due, including required security deposit of \$ _____, before occupancy.

X _____
Date

X _____
Applicant (signature required)

