

RENTAL APPLICATION

The undersigned makes application to rent housing accommodations located at
STREET ADDRESS: _____

There is a twenty-five dollar (\$25.00) nonrefundable application fee required from each adult applicant. Applications submitted without the application fee will NOT be processed.
All adults 18 and over must fill out a separate application.

Name: _____
 First Middle Last

Social Security Number: _____ Drivers License #: _____

Date of Birth: _____ Phone: _____ Fax: _____ Email: _____

Rental Information:

Present Address: _____ Zip Code _____

Date In: _____ Landlord: _____ Phone: _____ Rent: _____

Reason for Moving: _____ Date Avail to Move-in: _____

Previous Address: _____

Landlord: _____ Phone: _____ How Long: _____

Reason for Moving: _____ Rent: _____

Previous Address: _____

Landlord: _____ Phone: _____ How Long: _____

Reason for Moving: _____ Rent: _____

Name of ALL Proposed Occupants (Identify those over 18 yrs.- ie: Adult):

Will you have pets? _____ Describe pets: _____

Age of pets: _____ **Number of smokers in household (required):** _____

Employment:

Present Occupation: _____ Employer: _____

Address: _____ Phone: _____

How long with present Employer – YRS: _____ MO: _____ SALARY: _____

Previous Occupation: _____ Employer: _____

Address: _____ Phone: _____

How long with previous Employer – YRS: _____ MO: _____ SALARY: _____

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

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

Bank Information:

Checking Acct #: _____ Bank: _____ Branch: _____

Savings Acct #: _____ Bank: _____ Branch: _____

Have you ever filed for bankruptcy? _____ Have you ever been evicted? _____

Have you ever been served a 30-day notice? _____ Have you ever withheld rent? _____

Person to call in case of emergency? _____ Tele: _____

Applicant represents that all the above statements are true and correct and hereby authorizes verification of the above items including but not limited to the obtaining of a credit report and agrees to furnish additional credit references upon request.

Date: _____, 20____, **APPLICATION SIGNATURE:** _____

Applications are good for a period of 90 days from date of receipt.

PAYMENT OPTIONS (check one) Cash Check Visa Mastercard Amer Exp.

No. _____ - _____ - _____ - _____ Exp ____/____ Signature: _____

Notice: The California Department of Justice, sheriff's department, police departments serving jurisdictions of 200,000 or more and many other local law enforcement authorities maintain for public access a database of the locations of persons required to register pursuant to paragraph (1) of subdivision (a) of Section 290.4 of the Penal Code. The database is updated on a quarterly basis and a source of information about the presence of these individuals in any neighborhood. The Department of Justice also maintains a Sex Offender Identification Line through which inquiries about individuals may be made. This is a "900" telephone service. Callers must have specific information about individuals they are checking. Information regarding neighborhoods is not available through the "900" telephone service.

