Rental Application

(ALL SECTIONS MUST BE COMPLETED)

Property Address	Apt#	City	9	State	Zip				
The apartment rental rate \$	Depos	osit \$ Key Deposit \$							
Lease from/ to/_	/	\$50.00 AP	PLICATION FEE (CASH	ONLY & N	NON REFUNDABLE)				
Occupancy Limits: Studios – 1 Pers How were you referred to us? (Please circle		•		•	•				
General Information									
Full Name:			DOB:	/	/				
Home Phone: Work	Phone:	Cell Phone:							
Social Security No/	DL No		Email:						
Additional tenants: APPLICATION REQUIRED FOR EACH	ADULT								
Name:	Relationship:								
Name:	Relationship:								
Name:	e: Relationship:								
Rental History									
Current Address:									
Dates Lived at Address: From:	To:	Re	ason for leaving:						
Landlord/Manager Name:	Landlord/Manager Phone:								
Prior Address:									
Dates Lived at Address: From:	To:	Reason for leaving:							
Landlord/Manager Name:	Landlord/Manager Phone:								
Employment History									
Name and Address of Current Employer:									
Dates Employed: From: To:									
Name of Supervisor:	e of Supervisor: Supervisor's Phone:								
Name and Address of Previous Employer: _									
Dates Employed: From: To:		Title	e/Position						
Name of Supervisor:	Supervisor's Phone:								
Income									
Gross Monthly Employment Income (before deductions) \$									
Average Monthly Amounts of Other Income: \$									

Credit and Financial In	nformation – Co	opies of 3 Mo	st recent Bank Stat	ements or Pay Stubs Require	ed
Name of Your Bank(s)		Account	No.	Approx	κ. Balance
1				• •	
2				\$	
Names of Your Credito	nrs: Teler	ohone	Account Nur	nber Monthly Paymer	ıts
1					11.5
2					
3	(1			
Background: Have you ever filed Bankru	ntcv had Liens Luc	dgments or Pend	ding Law Suits? No	Yes	
•		_			
Have you ever been convic	ted of a crime of fe	elony? No	Yes If Yes	, case number	
If yes, explain					_
		2 No.			
Have you ever been evicted					
If yes, explain when and the	e circumstances				
FOR EMERGENCY PLE	ASE NOTIFY TH	E FOLLOWIN	G: 1. PERSONAL RE	FERENCE AND 2. RELATIVE	
Name	Telephone		Relationship	Address	
1	()				
2	()				
Automobile Information	<u>1</u>				
Automobile Make	Model	Year	Color	License Number	
Automobile Make	Model	Year	Color	License Number	
What persuaded you to	apply for this ap	artment?			
Do you have any Pets? _ If yes, explain					
I certify that all the informa	ntion given above is	s true and correc	ct and understand that	my lease or rental agreement may	-
-				rification of the information in this references. I understand that if I ho	
freeze" on my credit inform	ation with any of t	he credit report	ing agencies, I will pron	nptly lift the freeze for a reasonable	time so that my credit
		-		o so, the Landlord/Manager may co	nsider this an incomplete
application. (CC 1785.11.2.) Print Name	ı ınıs permission w	ını survive the ex	unulun oj my tenancy		_
Applicant Signature					-
Manager Signature					