□Tenant
□Guarantor

Name of Applicant:	

APPLICATION TO RENT

(All section	ns must b	e completed)	Individ	ual application	ons red	quired	from eac	ch occup	ant 18 ye	ars of a	ge or older.
Last Name		First Nar	me		Middle I	Name		Social Sec	curity Numl	ber or ITI	N
Other names	s used in th	ne last 10 years	Wo	ork phone numb	oer			Home pho	ne numbe	r	
Date of birth		E-mail add	dress	,				Mobile/Ce	II phone nu	umber	
Photo ID/Typ	ре	Number		Issuing govern	ment		Exp. date	<u>(</u>	Other ID		
Present a	address				City			State		Zip	
Date in		Date out	Landlord	Name				La	andlord pho	one numb	per
Reason f	or moving	out						Current re		onth	
2. Previous	address				City			State		Zip	
Date in		Date out	Landlord	Name				La	andlord pho	one numb	per
Reason f	or moving	out						Rent at m		1onth	
3. Next prev	ious addre	ess				Cit	ty	ļΨ	State	101111	Zip
Date in		Date out	Landlord	Name				La	andlord pho	one numb	per
Reason f	or moving	out						Rent at m		1onth	
Proposed Occupants:	Nam	e				Name		ļΨ	, , , , , , , , , , , , , , , , , , ,	101111	
List all in addition	Nam	e				Name					
to yourself	Nam	e				Name					
Do you have pets?	Desc	ribe			Do you h		Desc	ribe			
	hear abou	t this rental?		<u> </u>			<u> </u>				
A. Current E	mployer N	ame			Job Ti	tle or P	osition			Dates of	Employment
Employe	r address				Emplo	yer/Hu	man Reso	urces phon	e number		
City, Stat	e, Zip				Name	of your	superviso	r/human re	esources m	nanager	
Current gros	s income	Che	eck one								
\$			Week □ Mo	onth	ļ <u>-</u> .					1	
B. Prior Emp	oloyer Nan	16			Job Tit	tle or P	osition			Dates of	Employment
Employe	r address				Emplo (yer/Hu	man Reso	urces phon	e number		
City, Stat	e, Zip				Name	of you	r superviso	r/human re	esources m	nanager	
Other incom	e source _			Amount	\$			Frequer	ncy		
Other income	e source _			Amount	\$			Frequer	ncy		



□Tenant
□Guarantor

Name of Applicant:	

Name of your bank	Branch or address	Acc	Account Number		
	Please list ALL of your financial obli	nations below			
Name of Creditor	Address		none Number	Monthly Pn Amt.	
		()			
		()			
		, ,			
		()			
		()			
		()			
		()			
In case of emergency, notify:	Address: Street, City, St	ate 7in	Relationship	Phone	
in case of emergency, notify.	Address. Officer, only, on	ato, zip	Relationship	THOTIC	
		Length of			
Personal References:	Address: Street, City, State, Zip	Acquaintance	Occupation	Phone	
nobile: Make:	Model:	Year:	License #:		
nobile: Make:	Model:	Vaari	Licence #:		

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

Other motor vehicles:

□Tenant
□Guarantor

Name of Applicant:	

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:

In this section is listed below:
Name of Agency
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.

The undersigned Applicant is applying to rent the premises designated as: Apt. No Located at	
3. Total fee charged	\$
2. Cost to obtain, process and verify screening information (may include staff time and other	soft costs) \$
The amount charged is itemized as follows: 1. Actual cost of credit report, unlawful detainer (eviction) search, and/or other screening rep	oorts \$
	t.



□Tenant
□Guarantor

Name of Applicant:	

RECEIPT FOR TENANT SCREENING AND/OR CREDIT CHECKING FEES

On	, Landlord received \$ from the undersigned, hereinafter called "Applicant,"			
(Date) who offers to r	ent from Landlord the premises lo	cated at:		
				oplicable)
(Street Address)			, , (
(City)		, CA		
Payment is to be	e used to screen "Applicant". The amou	nt charged is itemized	d as follows:	
1. Actual cost of credit report, unlawful detainer (eviction) search, and/or other screening reports				\$
2. Cost to obtain, process and verify screening information (may include staff time and other soft costs)				\$
3. Total fee charged (cannot exceed the amount fixed by law)				\$
	For Landlord Use Only Screening fees paid by: Cash Personal Check Cashier's Check Money Order Credit Card # (Last 4 digits only) MC/VISA/AMEX Expiration Date:			
Landlard	□ by	ing for Landlord	Management Co. (If Applicable)	Agent for Landlord
Landlord	Individual Sign -	ing for Landlord	Management Co. (If Applicable)	

CALIFORNIA APARTMENT ASSOCIATION CODE FOR EQUAL HOUSING OPPORTUNITY

The California Apartment Association supports the spirit and intent of all local, state and federal fair housing laws for all residents without regard to color, race, religion, sex, marital status, mental or physical disability, age, familial status, sexual orientation, or national origin.

The California Apartment Association reaffirms its belief that equal opportunity can best be accomplished through effective leadership, education, and the mutual cooperation of owners, managers, and the public.

Therefore, as members of the California Apartment Association, we agree to abide by the following provisions of this Code for Equal Housing Opportunity:

- We agree that in the rental, lease, sale, purchase, or exchange of real property, owners and their employees have the responsibility to offer housing accommodations to all persons on an equal basis.
- We agree to set and implement fair and reasonable rental housing rules and guidelines and will provide equal and consistent services throughout our residents' tenancy.
- We agree that we have no right or responsibility to volunteer information regarding the racial, creed, or ethnic composition of any neighborhood, and we do not engage in any behavior or action that would result in "steering."
- We agree not to print, display, or circulate any statement or advertisement that indicates any preference, limitations, or discrimination in the rental or sale of housing.

