

Dear Applicant,

Thank you for choosing TCG Property Management to assist you with your real estate needs. In order to process your application, each of the items below are needed from ALL persons over the age of 18 planning to occupy the property:

- 1. Valid Drivers License or photo I.D.
- 2. Most recent pay stub showing YTD totals
- 3. Two most recent full bank statements (not summaries)
- 4. Credit Report (if you have one). Upon pre-approval we will run our own credit report(s)
- 5. Other sources of income please supply supporting documentation

If You Are Self Employed:

We will need the need items 1, 3, 4 and 5 listed above plus the first two pages of last year's tax return.

More Information (please read carefully)

- 1. Please include all pets on your Application Package.
- 2. All completed applications and documentation should be emailed to: applications@homesbytcg.com.
- 3. Any Guarantors must also submit an application package (no Verification of Residency).
- 4. A Renter's Insurance Policy, naming TCG Property Management as a co-insured will be required to be in effect prior to occupancy and throughout your tenancy.
- 5. Upon acceptance of your application and prior to occupancy, we will require a cashier's check or payment through Zelle (or electronic transfer) for the full amount of the first full month's rent and security deposit. Send Zelle payments to paulc@tcgprop.com
- 6. All monthly rental payments will be made through ACH (electronic funds transfer system) not by check.

Credit Report & Processing Fee

Before we process your application, we will also need to run a credit report. The non-refundable application cost is \$40 per applicant. The application fee may be paid through Zelle and sent to paulc@campbellgrouphomes.com.

Once again, thank you for choosing TCG Property Management to assist you.



Proposal to Lease Residence

Property Address:

Applicant Name(s):	
Co-Signer or Guarantor:	
 Management as a co-insured will tenancy. All monthly rental payments will be system) - not by check. 	enter's insurance policy naming TCG Property be required prior to occupancy and throughout e made through ACH (electronic funds transfer abide by the homeowners association rules and d to tenant prior to occupancy.
Additional terms:	
conditions above and understands the too wher approval. Upon owner's accommon applicant (s). If applicants are represent through the agent only. Applicants of	the premises upon the requested terms and nat final lease terms may change and are subject ceptance of this application, TCG Property stance of Application and Lease Terms" to ented by an agent, all communication must be acknowledge that upon acceptance, a cashier's e full first month's rent will be requested and
Applicant:	Date:
Applicant:	
Applicant:	Date:
O	D L



National Credit Reports

AUTHORIZATION TO DISCLOSE

To Whom it May Concern,

The undersigned Applicant(s) has applied to rent a property with TCG Property Management. You are hereby authorized to release my information to National Credit Reports which is required to complete the processing of a credit report. This also authorizes National Credit Reports to transmit our application request information through the internet in processing the credit report. You may act on a photocopy of this authorization instead of the original.

Necessary information may include, but is not limited to: (1) savings and/or checking account verification, (2) loan status and payment history verification, including credit union and mortgage balances and (3) any employment or related compensation verification.

The undersigned Applicant(s) authorizes the release to a credit reporting agency of any information that agency may need in order to complete its report.

Photocopying of Applicant(s) signature may be necessary for obtaining credit ratings and is hereby authorized.



APPLICATION TO LEASE OR RENT/SCREENING FEE

(C.A.R. Form LRA, Revised 12/22)



I. APPLICATION TO RENT

THIS SECTION TO BE COMPLETED BY APPLICANT. A SEPARATE APPLICATION TO LEASE OR RENT IS REQUIRED FOR EACH OCCUPANT 18 YEARS OF AGE OR OVER, OR AN EMANCIPATED MINOR.

1. 2.	Applicant is completing Application to Lease or Rent as a (check one)					
	В.	(for pury (1) Driver's License No. (2) See section II, 4 for Social Security Number/Tax	State Expires Identification Numbers. Such number shall be provided upon reques			
	-	Phone number: HomeW	r Agent, or Property Manager ("Housing Provider"). ork Other nship to applicant			
		Other vehicle(s):	nber and type) State Color			
	ı.	Relationship	upants of applicant's household)			
		Address	Phone Yes No			
		If yes, type				
	K.	Has applicant been a party to an unlawful detainer acti	on or filed bankruptcy within the last seven years?			
	L.		ked to move out of a residence?			
	M.	seven years?	may consider the nature of the felony and the length of time since is applicant's ability to meet its obligations under the lease terms, and any			
3.	RE	SIDENCE HISTORY				
	Cur	rrent address	Previous address			
		//State/Zip				
		mto	From toto			
		me of Housing Provider				
	Hou	you own this property? Yes No	Housing Provider's phone			
	Rea	you own this property?	Did you own this property? Yes No Reason for leaving this address			
4.		PLOYMENT AND INCOME HISTORY	Description and the second sec			
	Cur	rrent employer	Previous employer			
	Ero	rrent employer addressto	Previous employer addresstoto			
	Sur	mtoto	Supervisor			
	Sur	pervisor's phone	Supervisor's phone			
	Fm	ployment gross income \$per	Supervisor's phone			
		er income info	Other income info			
0 20	22, C	alifornia Association of REALTORS®, Inc.				
LR	A RE	VISED 12/22 (PAGE 1 OF 3)	Applicant's Initials () ()			

APPLICATION TO LEASE OR RENT/SCREENING FEE (LRA PAGE 1 OF 3)

Pro	pert	y Address:			Date:	
5	CREDIT INFORMATION					
٠.		CREDITORS				
	-	Name of Creditor:			Account	
		Monthly Payment: \$				ue: \$
		Name of Creditor:			Account _	
		Monthly Payment: \$			Balance D	ue: \$
		Name of Creditor:			Account	
		Monthly Payment: \$			Balance D	ue: \$
		Name of Creditor:			Account _	•
		Monthly Payment: \$			Balance D	ue: \$
	В.	BANKING Name of Book (Brook)			Account No.	
		Name of Bank/Branch:			Account No	e:\$
		Type of Account:			ACCOUNT DAIANT	ж. ә
		Name of Bank/Branch:			Account No.	
		Type of Account:			Account Balance	oe: \$
6.	PER	SONAL REFERENCES				
-	Nan	ne	Address			
	Pho	neLength of ac	cquaintance	Occupation		
	Nar	ne	Address	_		
	Pho	ne Length of ac	equaintance	Occupation		
7.		REST RELATIVE(S)				
	Nar	ne	Address			
	Pho	ne	Relationship			
	Nan	ne	Address			
	Pho	ne	Relationship			
В.	App	licant understands and agrees that: (i) th	nis is an application to rent	only and does	not guarantee tha	t applicant will be offered
	the	Premises; (ii) Housing Provider may rece	eive more than one applicat	ion for the Pren	nises and, (III) App	plicant will provide a copy
	of a	oplicant's driver's license or other accepta	able identification upon requ	iest.		
	App	licant represents the above information	to be true and complete,	and hereby aut	horizes Housing	Provider to: (i) verify the
	info	mation provided; and (ii) obtain a credit	report on applicant and (iii)	obtain an "Inve	stigative Consum	er Report" ("ICR") on and
	abo	ut applicant. An ICR may include, but not	be limited to, criminal back	ground checks,	reports on unlaw	ful detainers, bad checks
		d warnings, and employment and tenan				
	RE(SARDING BACKGROUND INVESTIGATI		1		
		Please check this box if you would be a check this y	uld like to receive at no ch	arne a conv of	an ICR or consu	mer credit report if one is
		obtained by the Housing Provider w	henever you have a right to	receive such a	copy under Califo	mia law.
9.		licant further authorizes Housing Provider		ior, current, or s	ubsequent owners	and/or agents with whom
	app	icant has had, or intends to have, a rental	relationship.			
	If ap	plication is not fully completed, or if section	on II, 2 is applicable and the	application is re	eceived without the	e full screening fee: (I) the
	app	ication will not be processed, and (ii) the a	application and any portion o	f the screening f	ee paid will be retu	ırned.
	Арр	licant Signature			[Date
		urn your completed application and any a				
		ress 2555 Townsgate Rd., Suite 200				
	Aut	2000 TOWNSYSTE NO., SUITE 200	Ony West	iake village	State CA	21p <u>81301</u>



Pro	pert	rty Address:			Date:	
		II. PROI	PERTY INFORMATION	AND SCREENING	FEE	
ГΗ	IS SE	SECTION TO BE COMPLETED B	Y HOUSING PROVIDER (applic	ant may fill in the "Premis	es" in paragraph 1A below):	
١.	PR	ROPERTY INFORMATION				
	A.	Applicant submits this application	on to lease or rent for the Premis	es located at		
					("Premises") or any	
	_	prospective locations which may				
	В.	Rental Amount: \$	Rent per month.			
,		C. Proposed move-in date: SCREENING FEE				
٤.	A.	A. Applicant will provide screening information and fee directly to Housing Provider's authorized screening service at:				
	В.	follows: (Civil Code Section 195)	0.6 sets the maximum screening e maximum screening fee in 20	fee that can be charged, a 20 was \$52.46 per applica	rectly to Housing Provider, applied as as adjusted annually by the Consumer ant, according to the DRE publication tistics website, www.bls.gov.)	
		\$	for credit reports prepared by	National (Credit Reporting ;	
					(other out-of-pocket expenses); and	
		\$ 40.00				
	C.	If 2B is selected, and the applic			Provider will notify Applicant, (ii) the gree paid will be returned.	
	D.	Applicant shall provide Socia	Security Number/Tax Identifica	tion Number to Housing P	Provider.	
			ng section regarding the scre	ening fee and acknowled	dges receipt of a completed copy.	
\p _l	plicar	ant Signature			Date	
Но	usin	ng Provider acknowledges recei	ipt of this entire Application to	Lease or Rent/Screening	ng Fee.	
Ву:			DRE Lic:	#	Date	

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LRA REVISED 12/22 (PAGE 3 OF 3)

