

# 8668 LOOKOUT MOUNTAIN AVE.

PHONE: 323-504-1188 EMAIL: lookoutlaurelcanyon@gmail.com

## **RENTAL APPLICATION**

<b>NAME:</b> (1 Applicant per application)	<b>PHONE NUMBER:</b>	<b>SOCIAL SECURITY #</b>	<b>DATE OF BIRTH:</b>
I hereby apply to rent the property at:	8668 Lookout Mountain Av. Los Angeles, CA 90046	Rental Amount: \$4,750 a month 1 Year lease	DEPOSIT: \$4,750

CURRENT HOME ADDRESS:	PRIOR HOME ADDRESS:
CITY:	CITY:
STATE:	STATE:
ZIP:	ZIP:
LENGTH OF RESIDENCY:	LENGTH OF RESIDENCY:
RENT PAID:	RENT PAID:
MANAGER PHONE NUMBER:	MANAGER PHONE NUMBER:
REASON FOR MOVE:	REASON FOR MOVE:

CURRENT EMPLOYMENT:	PREVIOUS EMPLOYMENT:
MONTHLY SALARY:	MONTHLY SALARY:
OCCUPATION:	OCCUPATION:
EMPLOYER NAME & PHONE #:	EMPLOYER NAME & PHONE #:
WORK ADDRESS:	WORK ADDRESS:
LENGTH OF EMPLOYMENT:	LENGTH OF EMPLOYMENT:

**Please List ALL Proposed Occupants and Their Ages:**

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**Do you have any credit problems?**

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**Do you have any pets: If yes, include breed and weight:**

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**Have you ever been evicted for any reason or had an unlawful detainer filed against you?**

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**Have you ever been convicted of selling, possessing, distributing or manufacturing illegal drugs?**

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APPLICANT REPRESENTS THAT STATEMENTS MADE ARE TRUE AND CORRECT AND HERE BY AUTHORIZES VERIFICATION OF REFERENCES TO INCLUDE BUT NOT LIMITED TO CREDIT CHECKS, UNLAWFUL DETAINER CHECKS & CRIMINAL SEARCHES AND AGREES TO FURNISH ADDITIONAL CREDIT REFERENCES ON REQUEST.

I authorize verification of the information contained herein solely for the purpose of establishing my qualifications as a tenant. I release anyone verifying such information or providing information, from liability. I authorize and understand that in order to qualify I would be charged for a full screening procedure requested by the landlord/owner. I understand that incomplete or incorrect information provided in the application, may cause a delay in processing and can result in denial of tenancy. Fees are non-refundable.

**APPLICANT SIGNATURE:**

**DATE:**

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