



1530 Purdue Ave #1
W. Los Angeles, CA. 90025
Phone: 310-853-1703
Fax: 310-853-1713
www.SeasidePropertiesInc.com
Info@SeasidePropertiesInc.com

APPLICATION PROCEDURE
ONE APPLICATION FOR EACH ADULT IS NEEDED

IMPORTANT: YOUR APPLICATION MAY BE DENIED IF IT IS INCOMPLETE.

TO APPLY, YOU WILL NEED:

- * A completed and signed application (one for each person over 18 years old.)
- * \$50.00 NON-REFUNDABLE fee per application, in form of cash or money order only, which covers the credit check processing charge. (There is no need to fill out the credit and banking sections of this application.)
- * Current proof of income (i.e., copies of your last two pay stubs or most recent federal income tax return)
- * A copy of your driver's license or state identification card. (A passport and/or green card may also be required.)
- * We must see your current driver's license. And you must provide a Social Security number.

What We Generally Look For in a Viable Application:

- * Total gross monthly income of all adults who intend to live in the unit that is at least 3 times the amount of the monthly rent. Higher income ratios may be required when there are co-signers/co-tenants who will not live in the residence.
 - * No evictions or bankruptcies
 - * Credit scores of 700 or higher.
- * Positive references from current and previous landlord, as well as from employer.
- * We conduct a credit/background check and confirm employment and salary/wage amounts.

Pet Policy:

WE DO *NOT* ACCEPT PETS. (*This is a general rule; exceptions are noted on the unit listing.*) EXCEPTIONS ARE MADE FOR **ONE** DOCUMENTED SUPPORT ANIMAL, OR **ONE** SERVICE DOG. APPLICANTS ARE REQUIRED TO STATE THE ANIMAL SPECIES, BREED AND WEIGHT.

Renter's Insurance:

We require tenants to maintain renter's insurance. The insurance we carry for each of our properties does ***not*** cover tenant's personal belongings.

International Students:

Citizens of other countries who will be or are attending college in the Los Angeles area also need to provide the following forms:

- * An I-20 issued by the school they will be attending
- * An F-1, issued by the U.S. government to students approved to study in the U.S.

In addition, if the student applicant is not employed and a co-signer/co-tenant is required, that person must have a US Social Security number and a driver's license issued by a U.S. state.

(over)

Acceptance is based on credit, rental histories, etc., along with the ability to pay the required monthly rent. More than one application, or group of applications, may be submitted for the same unit. In all cases, an application must be submitted for each adult occupant. Approval of applications is not on a "first-come, first-served" basis but rather on the best application we receive. We determine when an application will be reviewed and accepted.

When the unit is placed on the market, it usually is ready for immediate occupancy. If your application is approved, the security deposit and a full, first month's rent are due upon signing the lease.

If approved, an applicant is required to sign the lease within two business days unless other arrangements are made. If that deadline is missed, Seaside will move on to the next qualified applicant. All move-in funds are to be in the form of a cashier's check or money order only. After the initial move-in funds have been paid, subsequent monthly rental payments may be in the form of a personal check, money order, cashier's check, or our electronic rent payment system.

Before coming to the office to complete the application or to submit a completed application, please call for an appointment. Our usual office hours are 8 am to 5 pm, Monday through Friday. You can also drop the completed application(s) and fee(s) in a beige drop box near our office's front door, which has "Seaside Properties" printed on it. We are closed on weekends.

Before submitting the application, remember to complete the bottom portion on the first page, including signature and date.

Thanks and we look forward to working with you!



APPLICATION TO RENT

Complete separate application for each adult tenant.



1 Name: _____ Social Security #: _____
LAST FIRST MIDDLE

2 Driver's Lic./ID #: _____ State _____ Birthdate _____
MONTH - DAY - YEAR

3 Home Phone (____) _____ Work Phone (____) _____ Cell Phone (____) _____
Email: _____

CURRENT

Address: _____
STREET UNIT # CITY STATE ZIP

How Long? From (Month/Year): _____ To: _____ Last Rent Paid: Month _____ Amt. \$ _____

Owner/Manager _____ Tel: _____ Reason for Leaving _____

4 PREVIOUS

Address: _____
STREET UNIT # CITY STATE ZIP

How Long? From (Month/Year): _____ To: _____ Last Rent Paid: Month _____ Amt. \$ _____

Owner/Manager _____ Tel: _____ Reason for Leaving _____

5 SECOND PREVIOUS

Address: _____
STREET UNIT # CITY STATE ZIP

How Long? From (Month/Year): _____ To: _____ Last Rent Paid: Month _____ Amt. \$ _____

Owner/Manager _____ Tel: _____ Reason for Leaving _____

CURRENT EMPLOYMENT

Company Name _____ Address _____

Company Phone _____ Occupation/Position _____ Type of Business _____

Name of Supervisor _____ Dates of Employment - From: _____ To: _____ Monthly Salary _____

PREVIOUS EMPLOYMENT

Company Name _____ Address _____

Phone _____ Occupation/Position _____ Type of Business _____

Name of Supervisor _____ Dates of Employment - From: _____ To: _____ Monthly Salary _____

WHEN DO YOU PLAN TO MOVE IN? Date: _____

Applicant represents that the statements made are true and correct and authorizes Owner's verification of credit, income and references; and APPLICANT UNDERSTANDS AND AGREES THAT ANY MISREPRESENTATION AND/OR OMISSION IS GROUNDS FOR EVICTION. Applicant agrees to pay for said credit verification. Such payment is a part of the application process and is a charge for the administrative costs of application consideration. If Applicant pays by a personal check which is returned "NSF", applicant shall be liable for the charge on demand. The undersigned makes application to rent housing accommodations designated as:

I hereby apply to rent/lease Apartment No. _____ at _____

for \$ _____ per month and upon approval of my Application and signed Rental Agreement, I agree to pay the first month's rent of \$ _____ and a security deposit in the amount of \$ _____.

Applicant Signature _____ Date _____

For purposes of credit & rent liability only: LIST ALL ADDITIONAL ADULTS AND CHILDREN WHO WILL OCCUPY UNIT. Please put "F" for full time or "P" for part time after each name.

☐ If this box is checked there shall be no additional occupant(s).

Name _____ Age _____ Relationship _____

Name _____ Age _____ Relationship _____

Name _____ Age _____ Relationship _____

Name _____ Age _____ Relationship _____

ADDITIONAL INFORMATION

1. Have you ever had any credit problems? ☐ Yes ☐ No

2. Have you ever had an unlawful detainer filed against you? ☐ Yes ☐ No

3. Have you ever been evicted for non-payment of rent or for any other reason? ☐ Yes ☐ No

4. Have you ever filed bankruptcy? ☐ Yes ☐ No

5. Have you ever been convicted of a felony. ☐ Yes ☐ No

6. Do you have any animals? ☐ Yes ☐ No If Yes, How many? _____ Describe: _____

7. Will you be using any water-filled furniture in your residence? ☐ Yes ☐ No

If Yes, do you have insurance coverage? ☐ Yes ☐ No

8. Do you have any musical instruments? ☐ Yes ☐ No If yes, what kind _____

9. Do you smoke? ☐ Yes ☐ No Does any other proposed occupant smoke? ☐ Yes ☐ No

10. Please explain any "YES" answers. _____

BANKING INFORMATION

Name of Bank/S&L/Credit Union _____ Branch or Address _____

Checking #: _____ Approx. Bal. _____ Savings #: _____ Approx. Bal. _____

Name of Bank/S&L/Credit Union _____ Branch or Address _____

Checking #: _____ Approx. Bal. _____ Savings #: _____ Approx. Bal. _____

Other sources of income _____

CREDIT REFERENCES (Credit Cards/Car Payments/Other Loans)

Company Name _____ Address/City: _____

Account #: _____ Present Balance _____ Monthly Payment: _____

Company Name _____ Address/City: _____

Account #: _____ Present Balance _____ Monthly Payment: _____

Company Name _____ Address/City: _____

Account #: _____ Present Balance _____ Monthly Payment: _____

Company Name _____ Address/City: _____

Account #: _____ Present Balance _____ Monthly Payment: _____

EMERGENCY CONTACT

Name: _____ Address _____

Relationship _____ Phone (_____) _____

VEHICLES (Operable Automobiles including Trucks, Vans, Motorcycles)

Are you the registered owner? ☐ Yes ☐ No If not who? _____

Year _____ Make _____ Model _____ Color _____ License # _____ State _____

Year _____ Make _____ Model _____ Color _____ License # _____ State _____