

HOLLIS PROPERTY MANAGEMENT

2930 W. IMPERIAL HWY. 200-T * INGLEWOOD, CA 90303

PHONE: 310.571.8595 | FAX: 866.288.2105

May 3, 2022

To: All Applicants

From: L. Hollis Management

Re: **Vacancies, Applications to Rent & What to Include**

Hello Dear applicant;

We are looking for long term tenants who are high functioning, independent, family and goal oriented. We want applicants who pays their rent on time, busy, who are agreeable, emotionally stable, conscientious, who show consideration for others and their neighbors. If this describes you, we strongly encourage you to go through the screening process. Follow through is usually the toughest part of the process.

There are no application fees! However, a credit check will be run with your cooperation if, you make it to the 3rd step. Screenings are made through Transunion's Smartmove in partnership with USAA. They make objective recommendations, but does not decide. What is for you - is for you! We only use SmartMove to validate information, it does not disqualify you. And, screenings are conducted in a way that protects you from identity theft. In the meantime, thank you for considering us!

Please read carefully and follow the steps for submitting by following the directions below that lists what to include:

1. Completed application (**do not leave blanks**)
2. Copy of I.D. or Driver License and social security card
3. Proof of Income for 1 month. Example. If you're paid weekly, include four (4) copies of check stubs.
 - a. Primary Proof of Income (**Authentic**)
 - i. Check stubs
 - b. Other Acceptable Proof of Income
 - i. Bank Statements
 - ii. Previous year's tax return
 - iii. For Social Security, TANF or any other government payments – Include benefits letter. Must be less than six (6) months old.
4. Turn in application. Applications can be uploaded to website through the contact page or by submitting the following way by;
 - a. Email: lhollismanagement@gmail.com
 - b. Fax: 1.866.288.2105
 - c. Mailbox on site of the vacant unit
5. Chosen applicants must get and keep Renter's Insurance. **IT IS MANDATORY!** (see page 4).

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HOLLIS PROPERTY MANAGEMENT

POST OFFICE BOX 1445 * EL SEGUNDO, CA 90245

PHONE: 310.923.6973 | FAX: 866.288.2105



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 _____

Do you have a housing subsidy? Yes: No: If yes, what? Section 8: L.A. County Pilot Program: Other rent payment program: _____

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 _____

Renter's Insurance is Mandatory!

Renter's Insurance is a low cost insurance that protects both tenants and landlords against unforeseen events.

A basic policy usually covers,

- ✓ Property Damages
- ✓ Thefts on and off the premises
- ✓ Hotel in case of emergency
- ✓ Medical coverage for accidents
- ✓ Covers Cellphones and computers (better than cellphone insurance)
- ✓ Lawyers for lawsuits.
- ✓ Food replacement due to power outages
- ✓ Things rented or borrowed, storage contents, etc.

Policy Minimums: 150,000 – liability; 10,000 - Personal Items; Loss of Use - 5,000 - 10,000; Identity theft - 5,000+; Electronics - 10,000, Pet Addendum - \$5,000

This must be added to your policy >> - “Additional Interest, Leslie Hollis” @ P.O. Box 1445, El Segundo, Ca 90245 | Email:lhollismanagementinsurance@gmail.com

REFERENCES

Any reputable or known insurance company will be okay

As a consumer, you have the right to do business with whatever company you want however;
I do not give credit for *Mercury or Lemonade Insurance

- Allstate: Customer Service 877-810-2920. \$21 mo.
- AAA: Google
- Geico: 800-841-2964. We're here to help, 24/7. \$19.50 mo.
- Farmer's: Google
- *The Hartford: 860.547.5000
- ~~*Lemonade: We do not accept~~
- Liberty Mutual: 800.295.1739. \$19.60 mo.
- ~~*Mercury Insurance (Worker's Comp for Gardner's, nannies, maids, etc.):~~
- Nationwide: 866-633-5749. \$29
- Progressive Insurance: Google
- State Farm: State 855-980-8053. \$20 mo.