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.



Driver's Lic/ID #:	State	Name:	FIRS	ВТ	Social	Security #:		
Home Phone (Home Phone (Birthdate		
CURRENT Address: STREET UNIT # CITY STATE ZP HOW Long? From (Month/Year): To: Last Rent Paid: Month Amt.\$ Owner/Manager Tel: Reason for Leaving PREVIOUS Address: STREET UNIT # CITY STATE ZP HOW Long? From (Month/Year): To: Last Rent Paid: Month Amt.\$ Owner/Manager Tel: Reason for Leaving SECOND PREVIOUS Address: STREET UNIT # CITY STATE ZP HOW Long? From (Month/Year): To: Last Rent Paid: Month Amt.\$ Owner/Manager Tel: Reason for Leaving SECOND PREVIOUS Address: STREET UNIT # CITY STATE ZP HOW Long? From (Month/Year): To: Last Rent Paid: Month Amt.\$ Owner/Manager Tel: Reason for Leaving CURRENT EMPLOYMENT Company Name Address Company Name Occupation/Position Type of Business Name of Supervisor Dates of Employment-From: To: Monthly Salary PREVIOUS EMPLOYMENT Company Name Address 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 APPLIC UNDERSTANDS AND ACRESTHAT ANY MISREPRESENTATION AND/OR OMISSION IS GROUNDS FOR EVICTION. Applicant 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 consider if Applicant pays by a personal check which is returned "NSF", applicant shall be liable for the charge on demand. The undersigned makes application tent housing accomodations designated as: I hereby apply to rent/lease Apartment No. at	CURRENT Address: STREET UNIT CITY STATE 2P HOW Long? From (Month/Year): To: Last Rent Paid: Month Amtl.\$ Owner/Manager Tel: Reason for Leaving PREVIOUS Address: STREET UNIT CITY STATE 2P HOW Long? From (Month/Year): To: Last Rent Paid: Month Amtl.\$ Owner/Manager Tel: Reason for Leaving SECOND PREVIOUS Address: STREET UNIT CITY STATE 2P HOW Long? From (Month/Year): To: Last Rent Paid: Month Amtl.\$ Owner/Manager Tel: Reason for Leaving SECOND PREVIOUS Address: STREET UNIT CITY STATE 2P HOW Long? From (Month/Year): To: Last Rent Paid: Month Amtl.\$ 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 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 reference; and APPLIC UNDERSTANDS AND AGREES THAT ANY MISREPRESENTATION AND/OR OMISSION IS GROUNDS FOR EVICTION. Applicants 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 consider from thousing accomodations designated as: I hereby apply to rent/lease Apartment No. at Interest papilication and signed Rental Agreement, I agree to pay the first mo)	Cell Phone (_	N	27.51
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Form provided as a membership service of the Apartment Association of Greater Los Angeles

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For purposes of credit & rent liabilit	5.6 5.6	IONAL ADUL I	S AND CHILDREN	WHO WILL OCCUPY UNIT	I . Please put "
for full time or "P" for part time after each r					
If this box is checked there shal			Dalatianahin		
Name		875	20		
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ADDITIONAL INFORMATION					
I. Have you ever had any credit prob			•		
 Have you ever had an unlawful de Have you ever been evicted for no 	1.7				
. Have you ever filed bankruptcy?		any other reas	JII		
. Have you ever been convicted of a					
. Do you have any animals? Tyes					
. Will you be using any water-filled f		e? Tyes T	No		
If Yes, do you have insurance cov					
. Do you have any musical intruments					
. Do you smoke? TYes No	Does any other proposed	l occupant smo	ke?		
0. Please explain any "YES" ans	wers				
Name of Bank/S&L/Credit Union			Branch or A	ddress	
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 Car	ds/Car Payments/Othe	r Loans)			
Company Name		Address	/City:		
Account #:	Present	Balance		Monthly Payment:	
Company Name		Address	/City:		
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Company Name					
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EMERGENCY CONTACT					
Name:	ΔΑ	dress			
Relationship					
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VEHICLES (Operable Automobiles					
Are you the registered owner? TYes [No Ifnotwho?				
Year Make					

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

<u>This must be added to your policy >> - "Additional Interest</u>, Leslie Hollis" @ P.O. Box 1445, El Segundo, Ca 90245 | Email: | Ihollismanagementinsurance@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 no 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. \$29Progressive Insurance: Google

> State Farm: State 855-980-8053. \$20 mo.