



APPLICATION TO RENT/SCREENING FEE

(C.A.R. Form LRA, Revised 6/18)

I. APPLICATION TO RENT

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

1. Applicant is completing Application as a (check one) tenant, tenant with co-tenant(s) or guarantor/co-signor.
Total number of applicants _____

2. PREMISES INFORMATION

Application to rent property at _____ ("Premises")
Rent: \$ _____ per _____ Proposed move-in date _____

3. PERSONAL INFORMATION

A. FULL NAME OF APPLICANT _____

B. Date of Birth _____ (For purpose of obtaining credit reports. Age discrimination is prohibited by law.)

C. 1. Driver's License No. _____ State _____ Expires _____

2. See section II, 2 for Social Security Number/Tax Identification Numbers. Such number shall be provided upon request from Landlord/Manager/Agent.

D. Phone Number: Home _____ Work _____ Other _____

E. Email _____

F. Name(s) of all other proposed occupant(s) and relationship to applicant _____

G. Pet(s)(Other than service or companion animals)(number and type) _____

H. Auto: Make _____ Model _____ Year _____ License No. _____ State _____ Color _____

Other vehicle(s): _____

I. In case of emergency, person to notify _____

Relationship _____

Address _____ Phone _____

J. Does applicant or any proposed occupant plan to use liquid-filled furniture? No Yes Type _____

K. Has applicant been a party to an unlawful detainer action or filed bankruptcy within the last seven years? No Yes
If yes, explain _____

L. Has applicant or any proposed occupant ever been asked to move out of a residence? No Yes
If yes, explain _____

M. Has applicant or any proposed occupant ever been convicted of or pleaded no contest to a felony? No Yes
If yes, explain _____

(After completing a credit review, Landlord may consider the nature of the felony and the length of time since it occurred.)

4. RESIDENCE HISTORY

Current address _____

City/State/Zip _____

From _____ to _____

Name of Landlord/Manager _____

Landlord/Manager's phone _____

Do you own this property? No Yes

Reason for leaving current address _____

Previous address _____

City/State/Zip _____

From _____ to _____

Name of Landlord/Manager _____

Landlord/Manager's phone _____

Did you own this property? No Yes

Reason for leaving this address _____

5. EMPLOYMENT AND INCOME HISTORY

Current employer _____

Current employer address _____

From _____ To _____

Supervisor _____

Supervisor phone _____

Employment gross income \$ _____ per _____

Other income info _____

Previous employer _____

Prev. employer address _____

From _____ To _____

Supervisor _____

Supervisor phone _____

Employment gross income \$ _____ per _____

Other income info _____

Applicant's initials (_____) (_____)



Property Address: _____ Date: _____

6. CREDIT INFORMATION

Name of creditor	Account number	Monthly payment	Balance due

Name of bank/branch	Account number	Type of account	Account balance

7. PERSONAL REFERENCES

Name _____ Address _____
 Phone _____ Length of acquaintance _____ Occupation _____
 Name _____ Address _____
 Phone _____ Length of acquaintance _____ Occupation _____

8. NEAREST RELATIVE(S)

Name _____ Address _____
 Phone _____ Relationship _____
 Name _____ Address _____
 Phone _____ Relationship _____

Applicant understands and agrees that: (i) this is an application to rent only and does not guarantee that applicant will be offered the Premises; (ii) Landlord or Manager or Agent may receive more than one application for the Premises and, will select the best qualified applicant, and (iii) Applicant will provide a copy of applicant's driver's license or other acceptable identification upon request.

Applicant represents the above information to be true and complete, and hereby authorizes Landlord or Manager or Agent to: (i) verify the information provided; and (ii) obtain a credit report on applicant and other reports, warnings and verifications on and about applicant, which may include, but not be limited to, criminal background checks, reports on unlawful detainers, bad checks, fraud warnings, and employment and tenant history. Applicant further authorizes Landlord or Manager or Agent to disclose information to prior or subsequent owners and/or agents with whom applicant has had, or intends to have, a rental relationship.

If application is not fully completed, or if section II, 2 is applicable and the application is received without the full screening fee: (i) the application will not be processed, and (ii) the application and any portion of the screening fee paid will be returned.

Applicant _____ Date _____ Time _____

Return your completed application and any applicable fee not already paid to: **Kings County Properties**
 Address **1021 N 10th Ave Ste. 1** City **Hanford** State **CA** Zip **93230-3743**

II. SCREENING FEE

THIS SECTION TO BE COMPLETED BY LANDLORD, MANAGER OR AGENT.

1. Applicant will provide screening information and fee directly to Landlord/Manager/Agent's authorized screening service at **Kings County Properties**
- OR 2. Applicant has paid a nonrefundable screening fee of **\$25.00**, applied as follows: (The screening fee may not exceed \$30.00, adjusted annually from 1-1-98 commensurate with the increase in the Consumer Price Index. A CPI inflation calculator is available on the Bureau of Labor Statistics website, www.bls.gov.)

\$ _____ for credit reports prepared by **Equifax**;
 \$ _____ for _____ (other out-of-pocket expenses); and
 \$ _____ for processing.

Applicant Social Security Number/Tax Identification Number: _____

The undersigned has read the foregoing and acknowledges receipt of a copy.

Applicant Signature _____ Date _____

If 2 is selected, the undersigned has has not received the screening fee indicated above.

Landlord or Manager or Agent Signature _____ DRE Lic. # _____

Date _____

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Published and Distributed by:
REAL ESTATE BUSINESS SERVICES, INC.
 a subsidiary of the California Association of REALTORS®
 525 South Virgil Avenue, Los Angeles, California 90020

LRA REVISED 6/18 (PAGE 2 OF 2)

APPLICATION TO RENT/SCREENING FEE (LRA PAGE 2 OF 2)



KINGS COUNTY PROPERTIES

1021 N. 10th Ave. Ste. 1, Hanford CA. 93230

Ph: (559) 583-8640 Fax: (559) 583-8673

Edwin L. Pust Owner/Broker Lic. 00864009

Current and Previous Residency Verification Form

I Hereby authorize release of my residential information

Signature of Applicant/tenant _____

Date: _____

ATTN: _____

Names: _____

Address Verifying: _____

Move in/Move out dates: _____

Rent amount: _____

Rent Paid on time? Yes/No

NSF Checks? Yes/No

Pet's? How many? Breed? _____

30 day notice given? Yes/No

Were Police ever at unit during tenancy? Yes/No

If yes, Please explain _____

Are you related to the tenant? Yes/No

Would you rent to this tenant again? Yes/No

Persons Completing this form

Name: _____

Phone: _____

Comments: _____