☐Tenant	
☐ Guarantor	

## **APPLICATION TO RENT**

The state of the property of the party of th	t be completed)	Individual applicat	ions re	quire	d from	m eac	h occu	pant 18 ye	ars of	age or older.
						Social Security Number or ITIN				
Other names used in the last 10 years		Work phone num	Work phone number			ŀ	Home phone number			
Date of birth E-mail address			Mobile/Cell phone number							
Photo ID/Type	Number	Issuing gover	nment		Ехр.	date		Other ID		
Present address			City				Stat	е	Zip	
Date in	Date out	Landlord Name						andlord pho	one num	ber
Reason for movin	ng out				***************************************	9	Current r		onth	
2. Previous address	S		City				Stat	***************************************	Zip	
Date in	Date out	Landlord Name	The second secon	BOTTO, B. MARIES CO. C. S.			and a	andlord pho	one num	ber
Reason for moving out						1	Rent at i	move-out	onth	
3. Next previous ad	dress		4-1-1-1	Ci	ity		4	State		Zip
Date in	Date out	Landlord Name					-	andlord pho	one num	ber
Reason for movin	ng out					1	Rent at i	move-out /N	fonth	
Proposed Name Occupants:				Name						
List all Na in addition	ame		***************************************	Name						
to yourself Na	ame			Name				A CONTRACTOR OF THE CONTRACTOR		
Do you have Depets?	escribe		Do you have a Describe waterbed?							
How did you hear at	oout this rental?									
A. Current Employe	r Name		Job Ti	tle or F	Positio	on			Dates o	f Employment
Employer address			Employer/Human Resources phone number							
City, State, Zip			Name	of you	ır sup	ervisor	/human	resources n	nanager	
Current gross incom	ne Ch	neck one								
\$ B. Prior Employer N		Week  Month  Year		tle or F	Positio	on		and a resource of the second s	Dates o	of Employment
Employer addres							rces pho	one number		
City, State, Zip			(	Name of your supervisor/human resources manager						
Other income source	e	Amount	\$		**********		Freque	ency		
Other income source		Amount					_ Freque			



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Tenant Guarantor			Name of Applican	t:		
Name of your bank	Branch or address		Account Number · Type of A			
			count Number .	Type of Ac		
Name of Creditor	Please list ALL of your financial obli Address					
•	Address	P	hone Number	Monthly Pn Amt.		
		( )				
		()				
		()				
		( )				
In case of emergency, notify:	Address: Street, City, St.	ate, Zip	Relationship	Phone		
				According to		
Personal References:	Address: Street, City, State, Zip	Length of Acquaintance	Occupation	Phone		
		-	-			
mobile: Make:	Model:	Year:	License #:			
	Model;					

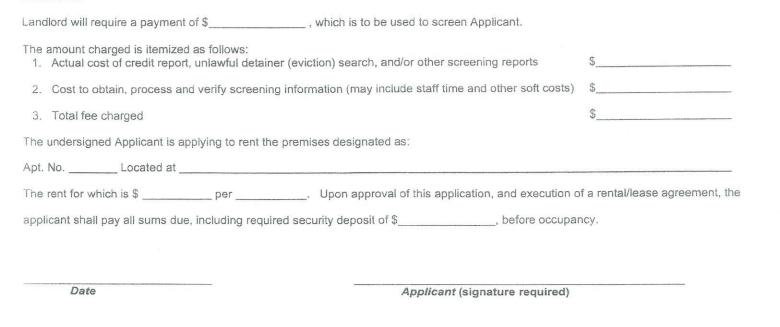
Have you ever filed for bankruptcy? \_\_\_\_\_ Have you ever been evicted or asked to move? \_\_\_

□T'enant □Guarantor	Name of Applicant:
NOTICE REGARDING CALIFORNIA INVESTIGATIVE CONSUMER I	REPORTING AGENCIES ACT
Landlord does not intend to request an investigative consumer report regarding the A	pplicant.
Unless the box above is checked, Landlord intends to request an investigative consumer repreputation, personal characteristics, and mode of living. Under Section 1786.22 of the Califor investigative consumer agency shall be made available to you during business hours and on dentification, as follows: (1) You may appear at the investigative consumer reporting agency written request for copies to be sent by certified mail to a specified addressee, or (3) you may be provided over the telephone. The agency may charge a fee, not to exceed the actual duple in gency is required to have personnel available to explain your file to you, and the agency must represent a person of your choice may accompany you, provided to reaccompanied by a person of your choosing, the agency may require you to furnish a writt investigative consumer reporting agency to discuss your file in the other person's presence. The this section is listed below:	rnia Civil Code, the files maintained on you by the reasonable notice, provided you furnish proper identified below in person, (2) you may make a y make a written request for a summary of the file to lication costs, if you request a copy of your file. The list explain to you any coded information appearing that this person furnishes proper identification. If you fen statement granting permission to the
lame of Agency	
Address of Agency	

If the box above is checked, Landlord agrees to send the report to Applicant within three (3) business days of the date the report is provided to

Applicant represents that all the above statements are true and correct, authorizes verification of the above items, and agrees to furnish additional credit references upon request. Applicant authorizes Landlord to obtain reports that may include credit reports, unlawful detainer (eviction) reports, bad check searches, social security number verification, fraud warnings, previous tenant history

and employment history. Applicant consents to allow Landlord to disclose tenancy information to previous or subsequent







If you would like a copy of the report(s) that is/are prepared, please check the box below:

☐ I would like to receive a copy of the report(s) that is/are prepared

Landlord. Landlord may contract with another entity to send a copy of the report.

□Tenant	Name of A
□Guarantor	

Name of Applicant:	9

## RECEIPT FOR TENANT SCREENING AND/OR CREDIT CHECKING FEES

(Street Addres	s) , Unit # (if	applicable)
(City)	, CA	
Payment is t	be used to screen "Applicant". The amount charged is itemized as follows:	
1. Actual co	st of credit report, unlawful detainer (eviction) search, and/or other screening reports	\$
2. Cost to ob	otain, process and verify screening information (may include staff time and other soft costs)	\$
3. Total fee	charged (cannot exceed the amount fixed by law)	\$
	For Landlord Use Only Screening fees paid by:  Cash Personal Check Cashier's Check Money Order Credit Card # (Last 4 digits only) MC/VISA/AMEX Expiration Date:	
	☐ by	and the same of th

## CALIFORNIA APARTMENT ASSOCIATION CODE FOR EQUAL HOUSING OPPORTUNITY

The California Apartment Association supports the spirit and intent of all local, state and federal fair housing laws for all residents without regard to color, race, religion, sex, marital status, mental or physical disability, age, familial status, sexual orientation, or national origin.

The California Apartment Association reaffirms its belief that equal opportunity can best be accomplished through effective leadership, education, and the mutual cooperation of owners, managers, and the public.

Therefore, as members of the California Apartment Association, we agree to abide by the following provisions of this Code for Equal Housing Opportunity:

- We agree that in the rental, lease, sale, purchase, or exchange of real property, owners and their employees have the responsibility to offer housing accommodations to all persons on an equal basis.
- We agree to set and implement fair and reasonable rental housing rules and guidelines and will provide equal and consistent services throughout our residents' tenancy.
- We agree that we have no right or responsibility to volunteer information regarding the racial, creed, or ethnic composition
  of any neighborhood, and we do not engage in any behavior or action that would result in "steering."
- We agree not to print, display, or circulate any statement or advertisement that indicates any preference, limitations, or discrimination in the rental or sale of housing.



Date