

APPLICATION TO RENT OR LEASE

Call 818 - 642 - 8754

Fill out, PRINT & Fax To: 818 - 773 - 7366

ADDRESS of PROPERTY You are applying for?

Advertised Price

#1

| | |
|--|----|
| | \$ |
|--|----|

APPLICANT Each Applicant over the age of 18 must complete their own application form.

#2

| | | | | | | |
|---------------------------------------|--------|-----------|---------------|-------------------|--------------------|-------|
| First | Middle | Last Name | Date of Birth | Social Security # | Driver's Licence # | State |
| | | | | | | |
| Other Names Used In The Last 10 Years | | | Cell Phone | Home Phone | Work Phone | |
| | | | | | | |

YOUR EMAIL

YOUR Education

#3

| | |
|--|--|
| | |
|--|--|

YOUR SPOUSE / PARTNER

#4

| | | | | |
|-------|--------|-----------|-----|---------------------------|
| First | Middle | Last Name | Age | Relationship To Applicant |
| | | | | |

ADDITIONAL OCCUPANTS List everyone, who will live with you:

#5

| | | | | |
|-------|--------|-----------|-----|---------------------------|
| First | Middle | Last Name | Age | Relationship To Applicant |
| | | | | |
| | | | | |
| | | | | |

PRESENT ADDRESS

CITY:

STATE:

ZIP

#6

| | | |
|------------------------|-----------|-----------------|
| | | |
| Date In: | Date Out: | Current Rent \$ |
| Owner or Manager Name: | | Phone # |
| REASON FOR MOVING: | | |

PREVIOUS ADDRESS

CITY:

STATE:

ZIP

#7

| | | |
|------------------------|-----------|---------------|
| | | |
| Date In: | Date Out: | Prior Rent \$ |
| Owner or Manager Name: | | Phone # |
| REASON FOR MOVING: | | |

TOTAL HOUSEHOLD INCOME Add all Income.

| | | |
|----|--|----|
| #8 | Total FAMILY Monthly NET Income "After Taxes" | \$ |
| | Your Personal Monthly NET Income "After Taxes" | \$ |
| | Other Family Monthly NET Income "After Taxes" | \$ |
| | Total of All Cars / SUV / Trucks Payments. | \$ |

EMPLOYMENT

| | | Current Employment | Prior Employment |
|----|---------------------|--------------------------------|--------------------------------|
| #9 | Employer | | |
| | Address | | |
| | Employer Phone | | |
| | Job Title | | |
| | Name of Supervisor | | |
| | Dates of Employment | From: To: | From: To: |
| | Income Per Month | \$ | \$ |

VEHICLES Must list all vehicles.

| #10 | Make | Color | Model | Year | License Plate | State | Monthly Payment |
|-----|------|-------|-------|------|---------------|-------|-----------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

SECTION 8 How Many Bedrooms? **3** **4** **5**

| | | | | |
|-----|----------------------|-----|----|-------------------------|
| #11 | Is this a Section 8? | Yes | No | What is Voucher Amount? |
|-----|----------------------|-----|----|-------------------------|

YOUR CREDIT IF YOU HAVE A COPY OF YOUR RECENT CREDIT PLEASE PROVIDE IT. Circle the one that applies.

| #12 | FICO Score | Bankruptcy | | Evictions | | Are you Late on Car Payments | | | Are you Late on RENT? | | |
|-----|------------|------------|----|-----------|----|------------------------------|----|-----|-----------------------|----|-----|
| | | Yes | No | Yes | No | Yes | No | N/A | Yes | No | N/A |

Please Explain any Credit Issues.

BANK ACCOUNTS

| #13 | BANK NAME | ACCOUNT TYPE | ACCOUNT NUMBER | CURRENT BALANCE |
|-----|-----------|--------------|----------------|-----------------|
| | | | | |
| | | | | |

CREDIT CARDS

| #14 | BANK NAME | CREDIT LIMIT | CURRENT BALANCE | MONTHLY PAYMENTS |
|-----|-----------|--------------|-----------------|------------------|
| | | | | |
| | | | | |

PETS Must list all pets.

| | NAME | TYPE | WEIGHT | AGE | IS IT AGGRESSIVE ? |
|-----|------|------|--------|-----|--------------------|
| #15 | | | | | |
| | | | | | |

Note: No pets are allowed at any time on the premises without prior Management consent and payment of a Fee. No Exceptions.

PERSONAL REFERENCES

| | NAME | RELATIONSHIP | PHONE NUMBER | CITY |
|-----|------|--------------|--------------|------|
| #16 | | | | |
| | | | | |
| | | | | |

EMERGENCY List the nearest relative first.

| | NAME | RELATIONSHIP | PHONE NUMBER | CITY |
|-----|------|--------------|--------------|------|
| #17 | | | | |
| | | | | |

DATE of DESIRED OCCUPANCY

HOW LONG DO INTEND TO STAY?

| | | |
|-----|--|--|
| #18 | | |
|-----|--|--|

Check Selection

| | |
|-----|--|
| #19 | Is the Total Move - In amount available now? (1st Month Rent + Security Deposit)? Yes No |
|-----|--|

PROOF of DOCUMENTS

Yes

No

N/A

| | | | | |
|-----|--|--|--|--|
| #20 | 1 - Copy of your Social Security. | | | |
| | 2 - Copy of Your Driver's Lic. | | | |
| | 3 - Copy of 2 months Bank Statement. | | | |
| | 4 - Copy of your Credit Report (if you happen to have one) | | | |
| | 5 - Copy of any utilities bills (Water & Power) last 2 months. | | | |
| | 6 - Pay Stub or any proof of income. | | | |
| | 7 - \$30 for Application Process per Adult. | | | |

APPLICANT'S SIGNATURE**DATE**

| | | |
|-----|--|--|
| #21 | | |
|-----|--|--|

EQUAL HOUSING OPPORTUNITY

We support 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.