APPLICATION TO RENT

☐Tenant ☐Guarantor

(All sections must be completed)	паттаци црр						ars of age or older.			
Last Name Fi	First Name Middle Name					Social Security Number or ITIN				
Other names used in the last 10 years Work phone numb			Home phor			one number	ne number			
Date of birth E-m			A	/lobile/Ce	ell phone nu	mber				
Photo ID/Type Number Issuing gove		government	ment Exp. date			Other ID				
Present address	ent address				State Zip					
Date in Date out	Owner/Agent Nam	ne		· _ ·	C	wner/Agent	Phone number			
Reason for moving out				9	Current re		onth			
2. Previous address					State		Zip			
Date in Date out	Date out Owner/Agent Nar					Owner/Agent Phone number				
Reason for moving out					I					
3. Next previous address			City			State	Zip			
Date in Date out	Date out Owner/Agent Name			Owner/Age			ent Phone number			
Reason for moving out										
Proposed Name Occupants:			Name							
List all Name in addition			Name Name							
to yourself Name										
Do you have Describe pets?	I I				Do you have a Describe vaterbed?					
How did you hear about this rental?				_!						
A. Current Employer Name			Job Title or Position Dates of Employment							
Employer address			Employer/Human Resources phone number							
City, State, Zip			Name of your supervisor/human resources manager							
Current gross income	Check one									
	er 🗆 Week 🗆 Month 🗈	Year								
B. Prior Employer Name			Job Title or Position Dates of Employment							
Employer address			Employer/Human Resources phone number (
City, State, Zip	Name	Name of your supervisor/human resources manager								
Other income source	Ar	mount \$			_ Freque	ncy				
Other income source	Ar	mount \$			_ Freque					





Name of your bank	Branch or addres	Ad	Account Number						
	Disease list Al I of your financial	abligations b	olow						
Name of Creditor		LL of your financial obligations below. Address Phone Nu			mber Monthly Pymt. Amt.				
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			,						
			-						
In case of emergency, no	tify: Address: Street, City	State 7in	()	Relationshi	Relationship Pho				
1.	my. Address. Street, City	, State, Zip		Relationsin	P	rilone			
2.									
B 187			th of	00000001		Б.			
Personal References 1.	Address: Street, City, State, Z	ip Acqua	intance	Occupation		Phone			
2.									
		Model: Year:							
Automobile: Make:	Model:	Ye	ar:	License #:					
Other motor vehicles:									
lave you ever filed for bankruptcy	? Have you ever t	peen evicted o	r asked to i	move?					
	selling, distributing or manufacturing illegal dru								
V2									
Applicant represents that all t	ne above statements are true and correct, a ences upon request. Applicant authorizes t	uthorizes ver	rification o	f the above ite	ms and	agrees to			
reports, unlawful detainer (evi	ction) reports, bad check searches, social	security num	ber verifica	ation, fraud wa	arnings,	previous			
tenant history and employment subsequent Owners/Agents.	t history. Applicant consents to allow Ow	ner/ Agent to	disclose t	enancy inforn	nation to	previous or			
		e a a a a a a a a a a a a a a a a a a a	NAMES IN A STREET OF THE STREET						
Owner/Agent will require a paym	eent of \$, which is to be	e used to scree	en Applicar	nt.					
The amount charged is itemized	as follows:								
Cost to obtain, process an	unlawful detainer (eviction) search, and/or otld verify screening information (may include sta	ner screening i off time and oth	reports \$ ner soft cos	ts) \$					
3. Total fee charged \$				-,-					
The undersigned is applying t	o rent the premises designated as:								
Apt. No Located at	900								
	per Upon approval of this			n of a sout-10-	000	amari il			
applicant shall pay all sums due	including required security deposit of \$	application, a	pefore occu	in or a rental/le ipancy.	ase agre	ernent, the			
Date	Applicant (signature required)								



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