APPLICATION TO RENT

☐Tenant ☐Guarantor

	All sections m	iust be	complet	ed)	Individ	ual applica	tions re	quired	from eac	ch occi	ipant 18 ye	ears of a	ge or older.
Last Name First Name)	Middle Name			Social Security Number or ITIN						
Other names used in the last 10 years					Wo	Work phone number ()			Home phone number ()				
Date of birth E-mail address										Mobile/0	Cell phone n)	umber	
Photo ID/Type		Number	lumber		Issuing government Exp. d		Exp. date		Other ID				
1.	Present address				City				Sta	State Zip			
	Date in		Date out		Owner/Ag	ent Name					Owner/Ager	nt Phone n	umber
	Reason for mo	oving ou	t							Current \$		fonth	***************************************
2.	Previous addr	ess				City			State Zip				
	Date in		Date out		Owner/Agent Name					Owner/Agent Phone number			
	Reason for mo	oving ou								,			
3.	Next previous	Next previous address						City State Zi			Zip		
	Date in	ľ	ate out		Owner/Ag				Owner/Agent Phone number		umber		
	Reason for mo	oving out	t							'			
Od	oposed cupants:							Name					
in	t all addition	Name			Name								
	yourself	Name					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Name			= · · ·		, management
Do you have Describe pets?						Do you h waterbed		Descr	ibe	,		,	
Ho	w did you hear	about th	is rental	?	-								
A.	Current Employer Name						Job Title or Position				Dates of	Employment	
	Employer address					Emplo (Employer/Human Resources phone number						
	City, State, Zip						Name	of you	r superviso	r/humar	resources i	manager	
Cu	rrent gross inco	ome		Check	c one		- Lugaria				***		
\$_	h :			Per 🗆 We	ek 🗆 Mo	nth ☐ Year							
B.	Prior Employe					····		tle or Po					Employment
	Employer address					Employer/Human Resources phone number ()							
	City, State, Zip)					Name of your supervisor/human resources manager						
Otl	ner income sou	rce				Amoun	t \$			_ Freque	ency		
Otl	ner income sou	rce				Amoun	t\$			_ Freque	ency_		



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Name of your bank	Name of your bank Branch or address			Account Number			
	Please list ALL of your financial obli	gations below	/.				
Name of Creditor	Address		Phone Nun	nber Mo	nthly Pymt. Amt.		
		()				
		(1				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					, n		
)				
***************************************		()				
		()				
		()				
In case of emergency, notify:	Address: Street, City, St	ate, Zip	Re	elationship	Phone		
2.			İ				
Daniel D. f.		Length o					
Personal References: 1.	Address: Street, City, State, Zip	Acquaintar	ice O	ccupation	Phone		
2.							
-							
utomobile: Make:	Model:	Year: _	L	icense #:			
utomobile: Make:	Model:	Year:		icense #:			
Other motor vehicles:							
lave you ever filed for bankruptcy?	Have you ever been	evicted or ask	ed to move	?			
lave you ever been convicted of selling,	distributing or manufacturing illegal drugs?						
reports, unlawful detainer (eviction)	ve statements are true and correct, authorizes the Correct, bad check searches, social security Applicant	Dwner/Agent t Irity number v	o obtain re erification	ports that ma	y include credit		
tenant history and employment history. Applicant consents to allow Owner/ Agent to disclose tenancy information to previous or subsequent Owners/Agents.							
Owner/Agent will require a payment of \$, which is to be used to screen Applicant.							
The amount charged is itemized as follows: 1. Actual cost of credit report, unlaws:		creenina repor	ts \$	1001			
The undersigned is applying to rent	the premises designated as:						
applicant shall pay all sums due, includ	r Upon approval of this apping required security deposit of \$	ication, and ex	e occupanc	a rental/lease : y.	agreement, the		
Date							
Date	Applicant	t (signature re	equired)				



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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							
	RECEIPT FOR TENANT SCREE						
On	, Owner/Agent received \$	fron	n the unde	ersigned, h	ereinafter call	ed "Applicant,"	
(Date) to rent from Owner/Agent the premises loca						
					, Unit # (if	applicable)	
Street Address)				•	/	
City)		, CA	(Zip)	•			
City)			(Zip)				
urnish additi eports, unlav	presents that all the above statements are true a donal credit references upon request. Applicant wful detainer (eviction) reports, bad check searc mployment history.	authorizes	the Owner/	Agent to obt	ain reports tha	t may include cred	lit
Payment is to	be used to screen "Applicant". The amount cha	arged is item	ized as follo	ows:			
. Actual cos	t of credit report, unlawful detainer (eviction) sea	arch, and/or o	other screer	ning reports		\$	
2. Cost to ob	tain, process and verify screening information (m	nay include s	staff time an	nd other soft	costs)	\$	



Date

Date

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Total fee charged (cannot exceed the amount fixed by law)

Applicant

Owner/Agent

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☐ Money Order



For Owner/Agent Use Only

Screening fees paid by: ☐ Cash ☐ Personal Check ☐ Cashier's Check

☐ Credit Card # (Last 4 digits only) MC/VISA/AMEX Expiration Date:

EMPLOYMENT VERIFICATION FORM

- This form is used to obtain information regarding the employment history of Applicants for rental housing. The information provided by the current or former Employer may be used solely for the purpose of evaluating the application for rental housing.
- The Owner/Agent requesting this information must receive authorization from the Applicant before obtaining the information. Such authorization is granted if Applicant's signature is provided in Section 1. Copies of this form and of the Applicant's signature are acceptable. The Applicant may be contacted to verify the authenticity of this request. Please mail or fax this form to the person listed in section 2 as soon as possible (within 24-48 hours)

TO BE COMPLETED BY APPLICANT

1. Authorization by rental Applicant for the release of in	nformation						
I hereby authorize the release of the information requested I hereby acknowledge that the Owner/Agent can make requested.	on this Employment copies of this execu	t Verification Request to the Owner/Agent listed below. uted page in order to obtain the information					
Name	mber ()						
Signature	Date						
TO BE COM 2. Person requesting the employment reference	PLETED BY OWNER	R/AGENT					
Name of Owner/Agent							
Address		Unit #					
City		State Zip					
Phone number ()							
3. Applicant's employment information: ☐ Present OR ☐ Prior Occupation (check one)							
Employer Name							
Employer Address							
City		State Zip					
Supervisor's/HR Manager's Name	Er	mployer/HR Phone number ()					
Beginning and Ending Dates of Employment							
Current Gross Income (if applicable) \$							
TO BE VERIFIED BY	CURRENT OR FOR	MER EMPLOYER					
4. Employment information verification		Verification provided by:					
Is the information provided in Section 3 above correct?		Name:					
Employer Name Employer Address Supervisor's/HR Manager's Name Employer/HR Phone Number Beginning and Ending Dates of Employment Current Gross Income (if applicable)	Yes No Yes No Yes No Yes No Yes No Yes No	Title:					
If No, please explain:	Verification obtained by:						
-		·					
		☐ Phone ☐ Mail ☐ Fax					
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RENTAL APPLICANT REFERENCE FORM

- This form is used to obtain information regarding the rental history of Applicants for rental housing. The information provided by the current or former Owner/Agent may be used solely for the purpose of evaluating the application for rental housing.
- The Owner/Agent requesting this information must receive authorization from the Applicant before obtaining the information. Such authorization is granted if Applicant's signature is provided in Section 1. Copies of this form and of the Applicant's signature are acceptable. The Applicant may be contacted to verify the authenticity of this request. Please mail or fax this form to the person listed in section 2 as soon as possible (within 24-48 hours)

TO BE COMPLETED BY APPLICANT

1. Authorization by rental Applicant for th	e release of information		
I hereby authorize the release of the informa below. I hereby acknowledge that the Ow- requested.			
Name		Phone number ()
Signature		Date	
	TO BE COMPLETED BY OWNE		
2. Person requesting the rental reference	•		
Name of Owner/Agent			
Address			Unit #
City	, 1100	State	Zip
Phone number ()	Fax number ()	
Applicant's rental information Name of rental community (if any)			
Address of rental unit			
City			
Name of Owner/Agent			
Phone number ()	Fax number ()	
Move-in date: Month Year	Move-out date: Month	Year	or □current resident
TO BE COM	MPLETED BY FORMER OR CUR	RENT OWNER/AG	ENT
4. Rental reference information Did Applicant live at your property during the part of no, what were the dates of occupancy? How many times during the past 12 months diwas any check from Applicant returned due to Did you ever file for an unlawful detainer again a lf yes, what was the result?	From (month/year):/ id Applicant pay the rent late? o non-sufficient funds (NSF)? nst Applicant for unpaid rent?	To (month/y	ear):/ □0 □1-2 □3-5 □6 or more □Yes □No
Does Applicant owe any amount for delinquent Did Applicant provide notice for ending tenanc Did you ever serve a Three Day Notice to App If yes, please explain:	cy according to the terms of the rer	ntal agreement? DNot applicable bed	□Yes □No cause Applicant still resides at unit □Yes □No
Information provided by: Name Information obtained by: ☐ Phone ☐Mail ☐)



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