

## CALIFORNIA APPLICATION TO LEASE (RESIDENTIAL)

### INSTRUCTIONS TO APPLICANT:

- A separate application must be filled out by each proposed adult occupant (18 years of age or older or emancipated minor).
- Completely fill out all applicable sections of the application. If something is not applicable, write "N/A" in that space.
- Provide full names, including full middle names, if any.
- Sign the application with your complete signature.
- When supplying addresses, give complete addresses including apartment numbers, cities, states and zip codes.

This application will be refused and/or denied:

- If it is not signed, complete, or legible;
- If government-issued photo identification is not presented;
- If any information is false, cannot be verified, or does not meet Landlord's criteria;
- If additional information is requested by Landlord and is not provided; or
- If the application of any proposed adult occupant or guarantor is denied.

### Applicant Information

<b>Applicant Name:</b> First Middle Last, Jr., Sr., I, II, III	<b>Date of Birth:</b>
<b>Gov't-Issued Photo ID #:</b> ID Type: ID Expiration Date:	<b>SSN or ITIN # (if you do not have an SSN or ITIN, please state "N/A"):</b>
<b>Current Address:</b> Number/Street/Unit #: City:                      State:                      Zip:	<b>Phone Number(s):</b> (    )    - <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work (    )    - <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work (    )    - <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work
	<b>Email:</b>
<b>How Long at this Address? Years:                      Mos.:</b>	<input type="checkbox"/> Rent <input type="checkbox"/> Own <b>Monthly Rent/Mortgage</b> \$
<b>Name of Landlord/Mortgage Holder:</b>	<b>Phone Number:</b> (    )    -

### Rental History

<b>Previous Address:</b> Number/Street/Unit #: City:                      State:                      Zip:	<b>How Long at this Address?</b> Years:                      Mos.:
	<input type="checkbox"/> Rent <input type="checkbox"/> Own <b>Monthly Rent/Mortgage</b> \$
<b>Name of Landlord/Mortgage Holder:</b>	<b>Phone Number:</b> (    )    -

**Rental History (cont.)**

<b>Previous Address:</b> Number/Street/Unit #: City:                      State:                      Zip:	<b>How Long at this Address?</b> Years:              Mos.:	
	<input type="checkbox"/> Rent <input type="checkbox"/> Own	Monthly Rent/Mortgage \$
<b>Name of Landlord/Mortgage Holder:</b>	Phone Number: (      )      -	
<b>Previous Address:</b> Number/Street/Unit #: City:                      State:                      Zip:	<b>How Long at this Address?</b> Years:              Mos.:	
	<input type="checkbox"/> Rent <input type="checkbox"/> Own	Monthly Rent/Mortgage \$
<b>Name of Landlord/Mortgage Holder:</b>	Phone Number: (      )      -	

**Additional Occupants**

(Each individual who will live with you must be listed, regardless of age)

<u>Occupant's Name</u>	<u>Date of Birth</u>

**Applicant's Income Information**

<b><u>Employment Information (If Employed)</u></b>	
<b>Employer:</b>	<b>Position:</b>
<b>Employer's Address:</b>	<b>Employer's Phone Number:</b> (      )      -
<b>Gross Salary: \$</b> <input type="checkbox"/> Yearly <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly	<b>Supervisor's Name:</b>



**Other Information (cont.)**

<b>Vehicle information:</b>				
Vehicle #1: Make/Model	Color:	Year:	License Plate #:	State:
Vehicle #2: Make/Model	Color:	Year:	License Plate #:	State:
Vehicle #3: Make/Model	Color:	Year:	License Plate #:	State:
Do you have any water-filled furniture?: <input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes, do you have insurance?: <input type="checkbox"/> Yes <input type="checkbox"/> No				
<b>Emergency Contact Information:</b>				
<b>Name:</b>		<b>Relationship:</b>		
Phone Number: (    )	-	<input type="checkbox"/> Home <input type="checkbox"/> Cell;	Other Contact Number: (    )	-
<b>Name:</b>		<b>Relationship:</b>		
Phone Number: (    )	-	<input type="checkbox"/> Home <input type="checkbox"/> Cell;	Other Contact Number: (    )	-

Applicant warrants that all information provided in this application and the supporting documentation is true, complete and accurate. Landlord will retain this application and all supporting documents whether or not the application is approved. Applicant hereby authorizes Landlord/Manager (and their agents) to verify the information above and to obtain reports necessary to verify the above information, which may include credit reports, investigative consumer reports, unlawful detainer (eviction) reports, bad check searches, social security number verification, income verification (including employment verification, if applicable) and previous tenant history.

Applicant releases and agrees to defend, hold harmless and indemnify Landlord/Manager, their agents, servants and employees from and against any and all liability, legal proceedings and costs including attorney's fees arising out of verification of the information contained in this application and supporting documentation.

Applicant understands that application fees are not a deposit and will not be refunded or applied to rent if applicant, occupants, or guarantor is approved or denied. Landlord/Manager requires payment of a **\$30** application screening fee per applicant to be submitted with the application. The application screening fee will be used to screen applicant with regards to credit history and other background information.

Print Applicant name:

\_\_\_\_\_

\_\_\_\_\_

(Applicant Signature)

Date: