

APPLICATION TO RENT Complete separate application for each adult tenant.



Name:	FIRST	Social S	Security #:		
Driver's Lic./ID #:			_ Birthdate _		
Home Phone ()	Work Phone (_)	Cell Phone (MONTH — DA	
CURRENT Address:					
SIREE		ONIT# CITY		STATE	ZIP
How Long? From (Month/Year):					
Owner/Manager	rei;	Reason r	or Leaving		
PREVIOUS Address:					
SIREEI		UNIT# CITY		STATE	ZIP
How Long? From (Month/Year):	To:La	ast Rent Paid: Month		Amt.\$	
Owner/Manager	Tel:	Reason for	Leaving	-deres-	
SECOND PREVIOUS Address:					
STREET		UNIT# CITY		STATE	ZIP
How Long? From (Month/Year):	To:La	ast Rent Paid: Month		Amt. \$	
Owner/Manager	Tel:				
CURRENT EMPLOYMENT			_		
Company Name		Address			
Company Phone	Occupation/Pos	sition	Type of E	Business	
Name of Supervisor	Dates of Emp	oloyment-From:	To:	Monthly Salary_	
PREVIOUS EMPLOYMENT					
Company Name					
Phone					
Name of Supervisor	Dates of Emp	ployment-From:	To:	Monthly Salary	
and references to include but no references on request. Applican Angeles, which check shall acc administrative costs of applicate The undersigned makes applica	tatements made are true and continuited to credit, unlawful dut agrees to pay for said verific company this Application. Such consideration. If applicant's	correct and hereby authoriz letainer and bounced chec lation via check made pays uch payment is a part of t is check is returned "NSF", dations designated as:	tes owner's period k checks and agrittle to the Apartm he application prowner shall be lia	rees to furnish and nent Association (cocess and is a cobble for the charge)	domonal credit of Greater Los charge for the e on demand
Jor\$p	er.month and upon approval of	my Application and signed	Rental Agreemen	t, I agree to pay th	e first month's
rent of \$	and a security deposit in the	amount of \$	·		
Applicant Signature			Date		

LIST ALL ADDITIONAL ADUL	TS AND CHILDREN WI	O WILL OCCUPY UN	IT - Please put "F" for full time of	r "P" for part time after each name.
If this box is checked there			•	· Seiscontain min
Name			Relationship	
Name				
Name				
Name		Age	Relationship	
ADDITIONAL INFORMATION				
1. Have you ever had any credit	problems? Tyes Th	No		
2. Have you ever had an unlawf	100	F11	::::	
3. Have you ever been evicted for		or for any other reason?	☐ Yes ☐ No	
 Have you ever filed bankrupto Have you ever been convicted 	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT	1 No		
6. Do you have any pets? Ye	20 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -		:	
7. Will you be using any water-fi	illed furniture in your resi	idence? Tyes No		
If Yes, do you have insurance 8. Do you have any musical intrum				
9. Do you smoke? Yes				,
10. Please explain any "YES"				
				- A-
		WA 1		
BANKING INFORMATION		(8)	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
Name of Bank/S&L/Credit Union	1		Branch or Address	
Checking #:	Approx. Bal.	Savings #:		Approx. Bal
Name of Bank/S&L/Credit Unio	on		Branch or Address	
Checking #:				
Other sources of income				
CREDIT REFERENCES (Credi	it Cards/Car Payments/	Other Loans)		
Company Name		Address/Ci	ty:	
Account #:				
Company Name				
Account #:	Pre	esent Balance	Monthl	y Payment:
Company Name		Address/City	/:	
Account #:	Pro	esent Balance	Month	y Payment:
Company Name		Address/C	ity:	
Account #:	Pr	esent Balance	Monthl	y Payment:
EMERGENCY CONTACT				
Name:				
Relationship			Phone ()
VEHICLES (Operable Automo	biles including Trucks,	Vans, Motorcycles)		
Are you the registered owner?				
Year Make				
Year Make	Model	Color	License #	State