APPLICATION TO RENT

APPLICANT

(One Per Each Adult Tenant)

FIRST NAME	MIDDLE	LAST	BIRTHDATE	SOCIAL SECURITY	DRIVERS LICENSE		
			/ /		#		
LIST ALL ADDITIONAL ADULTS AND CHILDREN			A CF	RELATIONSHIP	DEL		
LIST ALL ADDITIO	NAL ADOLIS AND C	IIILDREN	AGE	RELATIONSIIII	TO ATTEICANT		
				_			
DEGIDENCEG							
RESIDENCES DRESENT ADDRESS				CELL PHONE #			
			THLY PAYMENT?				
LENGTH OF OCCUPA	NCYHOM	IE PHONE #		_EMAIL			
NAME OF LANDLORE	O OR MORTGAGE CO	MPANY		FAX NUMBER			
ADDRESS			LANDLORD'S EM	IAIL			
LANDLORD'S PHONE N	UMBER	REAS	ON FOR MOVING				
					RS OF OCCUPANCY		
				HONE NUMBER			
EMPLOYMENT HIS							
1 EMDLOVED NAM	E.						
		NAME OF SUPERVISOR TELEPHONE					
		TELEPHONE INCOME PER MONTH					
2. EMPLOYER NAM	Е		NAME OF SUPERV	ISOR			
COMPANY ADDR	ESS	TELEPHONE					
OCCUPATION		INCOME PER MONTH					
EMPLOYMENT D	ATES						
PERSONAL REFERENCES ADDRESS/C		ADDRESS/CITY	RELATION	ISHIP PHONE NUME	BER TIME KNOWN .		
VEHICLE(S)	YEAR	MODEL	COLOR	LICENS	SE# STATE .		
Applicant represents that staten	nents made are true and correc	et and hereby authorizes verific	ation of references to include bu	t not limited to credit checks & unlawf	ful detainer checks and agrees to furnish		
					tenant. I release anyone verifying such lication. In the event of cancellation by		
				tising costs from the time the unit was ity for applicant(s) personal property.	removed from the advertisements/rental		

Date: / / Applicant Signature:

NAME OF BANK	BRANCH OR ADDRESS		ACCOUNT NO.	APPROX. BAL.
CREDIT REFERENCES	ADDRESS/CITY	PHONE	PRESENT BAL	. MONTHLY PYM
ENERAL INFORMATIO	N		- 1	
. HAVE YOU EVER HAD	ANY CREDIT PROBLEMS?			
. HAVE YOU EVER HAD	A 3 DAY NOTICE SERVED ON YOU	U AND/OR UNLA	WFUL DETAINER FII	LED AGAINST YOU?
. HAVE YOU EVER BEE	N EVICTED FOR NON-PAYMENT O	F RENT OR FOR .	ANY OTHER REASON	 I?
	ETS? IF SO HOW MAN			
	SE ANY WATER-FILLED FURNITU			
	(" YES " ANSWERS :			
	ILLED FURNITURE ALLOWED WITH plies to rent/lease Apartment No			
	, per month and upon OWNE			
	ent and security deposit of \$			re occupancy.
\$35.00 non-refundable ental application.	credit check fee per adult over the	age of eighteen	(18) years old & each	adult must fill out a
1	e hereby notified that a negative cred ou fail to fulfill the terms of your cre		g on your credit report	may be submitted to a
oring exact change), a copy of months of your bank state	with this application: \$35.00 credit choof picture I.D & social security card, 3 ments and copy of last years tax retur Reseda, CA 91335 (Canby gets cut of the second second second second second second second second sec	most current payns for each adult.	check stubs or if self — Please bring all docun	employed, we need the la nents to our office located
	the corner] Go through the white gat n and requirements please visit ou			mentinc.com
tional credit references upon request. I a rmation or providing information, from l icant after acceptance and security depos	true and correct and hereby authorizes verification of reuthorize verification of the information contained herein iability. It is understood that <u>ANY</u> false or incomplete it has been paid, applicant(s) will be charged a daily rate arry a personal property insurance policy. Landlord will a	solely for the purpose of e information is immediate for loss rent & advertising	establishing my qualifications as a grounds for rejection of this app g costs from the time the unit was	tenant. I release anyone verifying s lication. In the event of cancellation