APPLICATION TO RENT

☐Tenant ☐Guarantor

(/	Ali sections m	ust be c	complete	ea)	inaivia	uai appiica	tions red	quirea	trom eac				ge or older.
La	st Name			First Name			Middle I	Name		Social S	ecurity Num	ber or ITII	N
Otl	her names use	d in the l	ast 10 ye	ears	Wo (ork phone nur)	nber			Home p	hone numbe)	r	
Da	te of birth			E-mail addres	SS	,				Mobile/0	Cell phone nu	ımber	
Ph	oto ID/Type		Number			Issuing gove	rnment		Exp. date	IV.	Other ID		
1.	Present address			City				State Zip					
	Date in	Date out			Owner/Agent Name				Owner/Agent Phone number				umber
	Reason for mo	oving out								Current		41-	
2.	Previous address					City				\$ /Month State Zip			
	Date in Date out		ate out	Owner/Agent Name		ent Name					Owner/Agent Phone number		
Reason for moving out													
3.	Next previous address					City			ty		State		Zip
	Date in Date out				Owner/Agent Name						Owner/Agent Phone number		
	Reason for mo												
	oposed							Name					
Lis	ccupants: st all	all Name						Name					
in addition to yourself		Name						Name					
	you have ts?	Describe	9				Do you h		Desc	ribe			
	w did you hear	about th	is rental	?			waterbet	ur .					
	Current Employer Name						Job Title or Position Dates of Employ					Employment	
	Employer address						Employer/Human Resources phone number						
	City, State, Zip					Name of your supervisor/human resources manager							
Cu	I rrent gross inco	ome		Check	one								
\$				Per □ We	ek 🗆 Mo	onth 🗖 Year	r						
	Prior Employer Name					Job Ti	Job Title or Position Dates of Employment						
	Employer address					Emplo (Employer/Human Resources phone number						
	City, State, Zip					Name	Name of your supervisor/human resources manager						
Otl	her income sou	ırce				Amoun	nt \$			Frequ	ency		
	her income sou	· <u> </u>			_						ency		
							· +				- ·-,		



California Apartment Association Approved Form
www.caanet.org

Form 3.0-R – Revised 1/12 - ©2012 – All Rights Reserved Page 1 of 3

Unauthorized Reproduction of Blank Forms is Illegal.



Name of your bank		Branch or address				Account Number		
		Please list ALL of your financial obli	gations b	elow.				
Name of Creditor		Address Phone N			Number	mber Monthly Pymt. A		
				()				
				()				
				()				
				()				
				()				
				()				
In case of emergency, ne	otifu	Address: Street, City, St	ato Zin	()	Relationsl	l nin T	Phone	
	July.	Address. Street, City, St.	ate, zip		neiationsi	пр	FIIOIIE	
Personal References	: :	Address: Street, City, State, Zip		gth of intance	Occupation	on	Phone	
tomobile: Make:		Model:	Ye	ar:	License #	t:		
tomobile: Make:		Model:	Ye	ar:	License #	t:		
ner motor vehicles:								
		Have you ever been	evicted o	r asked to n	nove?			
		tributing or manufacturing illegal drugs?						
•								
		statements are true and correct, authon request. Applicant authorizes the C						
eports, unlawful detainer (ev	iction) rep	orts, bad check searches, social secu Applicant consents to allow Owner/	rity num	ber verifica	tion, fraud w	arning:	s, previous	
ubsequent Owners/Agents.	it ilistory.	Applicant consents to allow Owner/	Agent to	uisciose te	enancy mior	mation	to previous or	
Owner/Agent will require a payr	nent of \$, which is to be use	ed to scre	en Applican	t.			
The amount charged is itemized								
1. Actual cost of credit report	, unlawful d	detainer (eviction) search, and/or other s	creening	reports \$				
 Cost to obtain, process an Total fee charged \$ 		reening information (may include staff tin	ne and otl	ner soft cost	s) \$			
he undersigned is applying		nremises designated as:						
		•						
he rent for which is \$ pplicant shall pay all sums due	per , including	Upon approval of this apprequired security deposit of \$	lication, a	nd executio before occu	n of a rental/l pancy.	ease ag	reement, the	
Date		Applicant	(cianoti	re required	4/			
Date		Аррисан	Signall	are required	4)			



Unauthorized Reproduction of Blank Forms is Illegal.



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 SCREENING AND/OR CREDIT CHECKING FEES

	, Owner/Agent received \$	from the undersigned, hereinafter ca	illed "Applicant,"			
(Date) who offers to r	rent from Owner/Agent the premises locat	ed at:				
		, Unit # (i	f applicable)			
(Street Address)						
		, CA				
(City)		, CA 				
furnish addition reports, unlawfu history and emp	al credit references upon request. Applicant a il detainer (eviction) reports, bad check search loyment history.	d correct and authorizes verification of the about horizes the Owner/Agent to obtain reports the security number verification, fraud v	nat may include credit			
Payment is to be	e used to screen "Applicant". The amount char	ged is itemized as follows:				
1. Actual cost o	\$					
2. Cost to obtain	n, process and verify screening information (ma	ay include staff time and other soft costs)	\$			
3. Total fee cha	\$					
Date	Applicant	Screening fees paid				
Date	Owner/Agent	☐ Money Order ☐ Credit Card # (Last	☐ Personal Check ☐ Cashier's Check ☐ Money Order ☐ Credit Card # (Last 4 digits only) MC/VISA/AMEX Expiration Date:			



Unauthorized Reproduction of Blank Forms is Illegal.

