## **APPLICATION TO RENT**

(/	(All sections must be completed) Individual applications required from each occupant 18 years of age or older.													
Last Name First Name								Social Security Number or ITIN						
Other names used in the last 10 years Work phone num					nber	er Home p			hone number )					
Date of birth E-mail address						Mobile/Cell phone numb				mber				
Photo ID/Type Nu			Number	r		Issuing government Exp. c		Exp. date	e Other ID					
1.	Present address			I			City	City Sta			ate	zip		
	Date in		Date out		Owner/Agent Name			C			Dwner/Agent Phone number			
	Reason for moving out							Current \$	nt rent /Month					
2.	Previous address									state Zip				
	Date in	Date out	te out Owner/Agent Name							Owner/Agent Phone number				
	Reason for moving out				1						1			
3.	Next previous address				City			ty			State		Zip	
	Date in D		Date out	e out Owner/Agent Name				c			Ow	Owner/Agent Phone number		
	Reason for mo	oving ou	ıt											
Pr Oc	Proposed Name Occupants:				Name									
List all in addition to yourself		Name					Name							
		Name				Name								
Do you have D pets?		Describ	Describe			Do you h waterbec								
Hc	w did you hear	about t	his rental	!?					·					
A.	. Current Employer Name				Job Title or Position			Dates of Emplo			Employment			
	Employer address					Employer/Human Resources p ( )			urces ph	none number				
	City, State, Zip				Name of your supervisor/hun			or/humai	an resources manager					
Cι	irrent gross inco	ome		Check	k one									
\$ B.				Per 🗖 We	ek 🗆 Mo	onth 🗖 Year							Datas of	<b>Franks</b> we and
р.							Job Title or Position Dates of Employment					Employment		
	Employer address						Employer/Human Resources phone number							
	City, State, Zip						Name of your supervisor/human resources manager							
Other income source Amount \$							Frequ	iend	су					
Ot	Other income source Amount					t \$	Frequency							



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Name of your bank	Branch or address	Account Number			

Please list ALL of your financial obligations below.										
Name of Creditor	Address		Phone	e Number	Monthly Pymt. Amt.					
			)							
		(								
			)							
			)							
		(	)							
		(	)							
			,							
In case of emergency, notify:	Address: Street, City, St	ate. Zip	)	Relationsh	in	Phone				
1.		, <u></u> .p		Relationen	- P					
2.										
		Lengt								
Personal References: 1.	Address: Street, City, State, Zip	Acquair	ntance	Occupation		Phone				
1.										
2.										
Automobile: Make:	Model:	Yea	ır:	License #						
Automobile: Make:	Model:	Yea	ır:	License #	:					
Other motor vehicles:										
				•						
Have you ever filed for bankruptcy?	Have you ever been	evicted or	asked to	move?						
Have you ever been convicted of selling, dis	tributing or manufacturing illegal drugs?									
Applicant represents that all the above s furnish additional credit references upo reports, unlawful detainer (eviction) rep tenant history and employment history. subsequent Owners/Agents.	n request. Applicant authorizes the C orts, bad check searches, social secu	Owner/Age Irity numb	ent to obta	ain reports tha ation, fraud w	at may arnings	include credit s, previous				
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, unlawful detainer (eviction) search, and/or other screening reports \$										
The undersigned is applying to rent the	premises designated as:									
Apt. No Located at										
The rent for which is \$ per applicant shall pay all sums due, including	Upon approval of this app required security deposit of \$	lication, an , be	d executio efore occu	on of a rental/le upancy.	ease ag	reement, the				
Date Applicant (signature required)										
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California Apartment Association