

- Tenant
 Guarantor

APPLICATION TO RENT

Name of Applicant:

Submit Application to:
Email: m8ymo@hotmail.com
Phone: 657-443-4945
Fax: 562-430-6168

All sections must be completed. Individual applications are required from each occupant 18 years of age or older, unless instructed otherwise by Landlord. If any occupant over the age of 18 is not intended to be a signatory to the Rental/Lease Agreement, please contact Landlord regarding their policy prior to completing this Application.

Applicant is applying to rent the premises located at: **44526 La Paz Road, Temecula CA 92592**

PART 1 – PERSONAL INFORMATION & ADDRESS HISTORY

Last Name First Name Middle Name				SSN or ITIN	
Other names used in the last 10 yrs.		Work phone number		Home phone number	
Date of birth	E-mail address			Mobile/Cell phone number	
Photo ID/Type	Number	Issuing Gov.	Exp. date	Other ID	
Present address City State Zip					
Date in	Date out	Landlord Name		Landlord phone number	
Landlord email address					
Reason for moving out				Current rent \$ /Month	
Previous address City State Zip					
Date in	Date out	Landlord Name		Landlord phone number	
Landlord email address				Rent at move-out \$ /Month	
Reason for moving out					
Next previous address City State Zip					
Date in	Date out	Landlord Name		Landlord phone number	

Landlord email address	Rent at move-out \$ /Month
Reason for moving out	

PART 1 – PERSONAL INFORMATION & ADDRESS HISTORY (CONTINUED)

Proposed Occupants: List all in addition to yourself	Name	Name
	Name	Name
	Name	Name
	Name	Name

PART 2 – INCOME

Income from Employment <i>(If no income is received from employment, write N/A)</i>		
Current Employer Name	Job Title or Position	Dates of Employment
Employer address	Employer/Human Resources phone #	
City, State, Zip	Name of supervisor/human resources manager	
Employer/Human Resources email		
Current gross employment income amount: \$	<i>(check one)</i> Per <input type="checkbox"/> Week <input type="checkbox"/> Month <input type="checkbox"/> Year	
Prior Employer Name	Job Title or Position	Dates of Employment
Employer address	Employer/Human Resources phone number	
City, State, Zip	Name of supervisor/human resources manager	

PART 3 – ASSETS & LIABILITIES

Name of your financial institution	Branch or address	Account Number	Type of Acct

PART 3 – ASSETS & LIABILITIES (CONTINUED)

Please list ALL of your financial obligations below.			
Name of Creditor	Address	Phone Number	Monthly Pmt. Amount

PART 4 – EMERGENCY CONTACT(S)

In case of emergency, notify:	Address: Street, City, State, Zip	Relation	Phone
1.			
2.			

PART 5 – REFERENCES

Personal References:	Address: Street, City, State, Zip	Length of Acquaintance	Occupation	Phone
1.				

2.				
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PART 6 – MISCELLANEOUS INFORMATION		
Vehicles		
Automobile #1	Make:	Model:
	Year:	License #:
Automobile #2	Make:	Model:
	Year:	License #:
Other motor vehicles (list all):		
Other Information		
Have you ever filed for bankruptcy? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, explain:		
Have you ever been evicted or asked to move? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, explain:		
Do you have pets? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, describe:		
Do you have a waterbed? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, describe:		
How did you hear about this rental?		

NOTICE REGARDING CALIFORNIA INVESTIGATIVE CONSUMER REPORTING AGENCIES ACT

Landlord intends to request an investigative consumer report regarding the Applicant's character, general reputation, personal characteristics, and mode of living. Under Section 1786.22 of the California Civil Code, the files maintained on you by the investigative consumer agency shall be made available to you during business hours and on reasonable notice, provided you furnish proper identification, as follows: (1) You may appear at the investigative consumer reporting agency identified below in person, (2) you may make a written request for copies to be sent by certified mail to a specified addressee, or (3) you may make a written request for a summary of the file to be provided over the telephone. The agency may charge a fee, not to exceed the actual duplication costs, if you request a copy of your file. The agency is required to have personnel available to explain your file to you, and the agency must explain to you any coded information appearing in your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identification. If you are accompanied by a person of your choosing, the agency may require you to furnish a written statement granting permission to the investigative consumer reporting agency to discuss your file in the other person's presence. The agency that will prepare the report(s) identified in this section is listed below:

Agency: TransUnion Rental Screening Solutions, Inc

Address: 6430 S Fiddlers Green Cir, Suite 500, Greenwood Village, CO 80111

Contact: 866-775-0961

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