



APPLICATION TO RENT/SCREENING FEE

(C.A.R. Form LRA, Revised 6/18)

I. APPLICATION TO RENT

THIS SECTION TO BE COMPLETED BY APPLICANT. A SEPARATE APPLICATION TO RENT IS REQUIRED FOR EACH OCCUPANT 18 YEARS OF AGE OR OVER, OR AN EMANCIPATED MINOR.

- 1. Applicant is completing Application as a (check one) tenant, tenant with co-tenant(s) or guarantor/co-signor.
2. PREMISES INFORMATION
3. PERSONAL INFORMATION
A. FULL NAME OF APPLICANT
B. Date of Birth
C. 1. Driver's License No. State Expires
2. See section II, 2 for Social Security Number/Tax Identification Numbers.
D. Phone Number: Home Work Other
E. Email
F. Name(s) of all other proposed occupant(s) and relationship to applicant
G. Pet(s)(Other than service or companion animals)(number and type)
H. Auto: Make Model Year License No. State Color
I. In case of emergency, person to notify
J. Does applicant or any proposed occupant plan to use liquid-filled furniture?
K. Has applicant been a party to an unlawful detainer action or filed bankruptcy within the last seven years?
L. Has applicant or any proposed occupant ever been asked to move out of a residence?
M. Has applicant or any proposed occupant ever been convicted of or pleaded no contest to a felony?

- 4. RESIDENCE HISTORY
Current address
City/State/Zip
From to
Name of Landlord/Manager
Landlord/Manager's phone
Do you own this property?
Reason for leaving current address
Previous address
City/State/Zip
From to
Name of Landlord/Manager
Landlord/Manager's phone
Did you own this property?
Reason for leaving this address

- 5. EMPLOYMENT AND INCOME HISTORY
Current employer
Current employer address
From To
Supervisor
Supervisor phone
Employment gross income \$ per
Other income info
Previous employer
Prev. employer address
From To
Supervisor
Supervisor phone
Employment gross income \$ per
Other income info



Property Address: _____

Date: _____

6. CREDIT INFORMATION

| Name of creditor | Account number | Monthly payment | Balance due |
|------------------|----------------|-----------------|-------------|
| | | | |
| | | | |

| Name of bank/branch | Account number | Type of account | Account balance |
|---------------------|----------------|-----------------|-----------------|
| | | | |
| | | | |

7. PERSONAL REFERENCES

Name _____ Address _____
 Phone _____ Length of acquaintance _____ Occupation _____
 Name _____ Address _____
 Phone _____ Length of acquaintance _____ Occupation _____

8. NEAREST RELATIVE(S)

Name _____ Address _____
 Phone _____ Relationship _____
 Name _____ Address _____
 Phone _____ Relationship _____

Applicant understands and agrees that: (i) this is an application to rent only and does not guarantee that applicant will be offered the Premises; (ii) Landlord or Manager or Agent may receive more than one application for the Premises and, will select the best qualified applicant, and (iii) Applicant will provide a copy of applicant's driver's license or other acceptable identification upon request.

Applicant represents the above information to be true and complete, and hereby authorizes Landlord or Manager or Agent to: (i) verify the information provided; and (ii) obtain a credit report on applicant and other reports, warnings and verifications on and about applicant, which may include, but not be limited to, criminal background checks, reports on unlawful detainers, bad checks, fraud warnings, and employment and tenant history. Applicant further authorizes Landlord or Manager or Agent to disclose information to prior or subsequent owners and/or agents with whom applicant has had, or intends to have, a rental relationship.

If application is not fully completed, or if section II, 2 is applicable and the application is received without the full screening fee: (i) the application will not be processed, and (ii) the application and any portion of the screening fee paid will be returned.

Applicant _____ Date _____ Time _____

Return your completed application and any applicable fee not already paid to:

Address 3511 Del Paso Rd., Ste. 160-433 City California State CA Zip 95835

II. SCREENING FEE

THIS SECTION TO BE COMPLETED BY LANDLORD, MANAGER OR AGENT.

1. Applicant will provide screening information and fee directly to Landlord/Manager/Agent's authorized screening service at _____

OR 2. Applicant has paid a nonrefundable screening fee of \$ _____, applied as follows: (The screening fee may not exceed \$30.00, adjusted annually from 1-1-98 commensurate with the increase in the Consumer Price Index. A CPI inflation calculator is available on the Bureau of Labor Statistics website, www.bls.gov.)

\$ 30.00 for credit reports prepared by _____ **Tenant Reports** _____;
 \$ _____ for _____ (other out-of-pocket expenses); and
 \$ _____ for processing.

Applicant Social Security Number/Tax Identification Number: _____

The undersigned has read the foregoing and acknowledges receipt of a copy.

Applicant Signature _____ Date _____

If 2 is selected, the undersigned has has not received the screening fee indicated above.

Landlord or Manager or Agent Signature _____ DRE Lic. # _____
Date _____

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