



APPLICATION TO RENT

(Please Complete Separate Application for Each Adult Applicant)

www.aagla.org

Name: _____
LAST FIRST MIDDLE INIT.

a/k/a, If Other Than Legal Name: _____

Driver's License or Govt. Issued Identification No.: _____ State: _____

Birthdate: _____ Social Security No./ Individual Tax I.D. No.: _____
Month - Day - Year

Home Phone #: (____) _____ Work Phone #: (____) _____ Cell Phone #: (____) _____

Email: _____

Current Address: _____
Street Unit # City State ZIP Code

How Long?
From (Month/Year): _____ To: _____ Last Rent Paid Month: _____ Amt: \$ _____

Owner/Manager: _____ Telephone #: _____

Owner/Manager Email Address: _____

Reason for Leaving: _____

1st Previous Address

Address: _____
Street Unit # City State ZIP Code

How Long?
From (Month/Year): _____ To: _____ Last Rent Paid Month: _____ Amt: \$ _____

Owner/Manager: _____ Telephone #: _____

Owner/Manager Email Address: _____

Reason for Leaving: _____

2nd Previous Address

Address: _____
STREET UNIT # CITY STATE ZIP CODE

How Long?

From (Month/Year): _____ To: _____ Last Rent Paid Month: _____ Amt: \$ _____

Owner/Manager: _____ Telephone #: _____

Owner/Manager Email Address: _____

Reason for Leaving: _____

Current Employment

Company Name: _____ Address: _____

Company Phone #: _____ Occupation: _____ Type of Business: _____

Name of Supervisor: _____

Employment Date - From: _____ To: _____ Monthly Salary: _____

PREVIOUS EMPLOYMENT:

Company Name: _____ Address: _____

Company Phone #: _____ Occupation: _____ Type of Business: _____

Name of Supervisor: _____

Employment Date - From: _____ To: _____ Monthly Salary: _____

When do you plan to move-in? Date: _____, 20____

Applicant represents that the statements made are true and correct and authorizes Owner's verification of credit, income and references; and APPLICANT UNDERSTANDS AND AGREES THAT ANY MISREPRESENTATION AND/OR OMISSION IS GROUNDS FOR EVICTION. Applicant agrees to pay for said credit verification. Such payment is a part of the application process and is a charge for the administrative costs of application consideration. If Applicant pays by a personal check which is returned "NSF", applicant shall be liable for the charge on demand. The undersigned makes application to rent housing accommodations designated as follows:

I hereby apply to rent / lease Apartment No. _____ at _____

for \$ _____ per month and upon approval of my Application and signed Rental Agreement, I

further agree to pay the first month's rent of \$ _____ and a security deposit in the amount of

\$ _____.

(Continued...)

Applicant understands and agrees that investigative consumer report and background inquiry may be made regarding the Applicant's character, general reputation, past rental history, employment history, personal characteristics, and mode of living. If applicant wishes to receive a copy of any consumer credit bureau or background reports prepared, please check the following box: ☐ The name and address of the investigative consumer reporting agency that will prepare the report and a summary will be as follows:

Name of Reporting Agency

Address of Reporting Agency

Applicant Signature _____ **Date** _____

For purposes of credit and rent liability only: LIST ALL ADDITIONAL OCCUPANTS WHO WILL OCCUPY UNIT. Please put "F" for full time or "P" for part time after each name.

☐ If this box is checked there shall be no additional occupant(s).

Name: _____ **Age:** _____ **Relationship:** _____

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Name: _____ **Age:** _____ **Relationship:** _____

Name: _____ **Age:** _____ **Relationship:** _____

Additional Information:

- | | |
|---|--|
| 1. Have you ever had any credit problems? | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 2. Have you ever had an unlawful detainer filed against you? | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 3. Have you ever been evicted for non-payment of rent for any other reason? | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 4. Have you ever filed for bankruptcy? | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 5. Have you ever been convicted of a felony? | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 6. Do you have any animals? | <input type="checkbox"/> YES <input type="checkbox"/> NO |

If Yes, how many? _____ Describe: _____

- | | |
|--|--|
| 7. Will you be using any water-filled furniture in your residence? | <input type="checkbox"/> YES <input type="checkbox"/> NO |
|--|--|

If Yes, do you have insurance coverage? ☐ YES ☐ NO

- | | |
|---|--|
| 8. Do you have any musical instruments? | <input type="checkbox"/> YES <input type="checkbox"/> NO |
|---|--|

If Yes, what kind? _____

(Continued...)

9. Do you smoke?

☐ YES ☐ NO

Does any other proposed occupant smoke?

☐ YES ☐ NO

10. Is Applicant utilizing a Reusable Tenant Screening Report as defined California Assembly Bill 2559 (2022)?

☐ YES ☐ NO

If a Reusable Tenant Screening Report is being utilized, then Applicant, under penalty of perjury, hereby affirms that there has not been a material change to the information contained in the Reusable Tenant Screening Report.

11. Please explain any "YES" answers other than for Item 10. _____

Banking Information:

Name of Bank or Credit Union: _____ Branch or Address: _____

Checking #: _____ Approx. Bal.: \$ _____

Savings #: _____ Approx. Bal.: \$ _____

Name of Bank or Credit Union: _____ Branch or Address: _____

Checking #: _____ Approx. Bal.: \$ _____

Savings #: _____ Approx. Bal.: \$ _____

Other Sources of income: _____

Credit References (Credit Cards/Car Payments/Other Loans):

Company Name: _____ Address/City: _____

Account #: _____ Present Balance: \$ _____ Monthly Payment: \$ _____

Company Name: _____ Address/City: _____

Account #: _____ Present Balance: \$ _____ Monthly Payment: \$ _____

Company Name: _____ Address/City: _____

Account #: _____ Present Balance: \$ _____ Monthly Payment: \$ _____

Company Name: _____ Address/City: _____

Account #: _____ Present Balance: \$ _____ Monthly Payment: \$ _____

Emergency Contact:

Name: _____ Address: _____

Relationship: _____ Phone #: (____) _____

Vehicles (Operable Automobiles including Trucks, Vans, Motorcycles):

Are you a registered owner? ☐ YES ☐ NO

If NO, who? _____

Year: _____ Make: _____ Model: _____ Color: _____ License #: _____ State: _____

Year: _____ Make: _____ Model: _____ Color: _____ License #: _____ State: _____

Year: _____ Make: _____ Model: _____ Color: _____ License #: _____ State: _____

Notice: Under California law, applicants receiving a government rent subsidy have the option, at the applicant's discretion, of providing lawful, verifiable, alternative evidence of the applicant's reasonable ability to pay tenant's portion of the rent. This includes, without limitation, government benefit payments, pay records, and bank statements. If an eligible applicant elects to submit alternative evidence, we will consider this alternative evidence in lieu of obtaining the applicant's credit history.

**Notice Regarding Background Investigation Pursuant to California Law
(For California Applicants Only)**

You are hereby notified that by completing this application process, you acknowledge that we may obtain information about you from an investigative consumer reporting agency (ICRA). Such information may include information about your character, general reputation, personal characteristics, and mode of living. With respect to any investigative consumer report from an investigative consumer reporting agency ("ICRA"), we may investigate the information contained in your application and other background information about you, including but not limited to, your criminal history, driving records, or other information about you. This information and any reports about you may be used as a factor in making a housing decision. The source of any investigative consumer report (as that term is defined under California law's "Investigative Consumer Reporting Agencies Act") will be the person(s) or entities set forth below.

Name of Individual or Entity: _____

Address: _____
 Apt. No. *Address*

 _____ California _____
 City *Zip Code*

Telephone: _(_____)_____