

## RENTAL APPLICATION

APPLICANT'S BEST CONTACT PHONE: ( \_\_\_\_\_ ) \_\_\_\_\_

COMMUNITY NAME: Tierra Rica Apartments COMMUNITY PHONE: (530) 544-0676 APT #:

APPLICANT'S LAST NAME	FIRST	M/I	SOCIAL SECURITY #	D.O.B.	D.L. # AND STATE ISSUED	
APPLICANT'S LAST NAME	FIRST	M/I	SOCIAL SECURITY #	D.O.B.	D.L. # AND STATE ISSUED	
APPLICANT'S LAST NAME	FIRST	M/I	SOCIAL SECURITY #	D.O.B.	D.L. # AND STATE ISSUED	
OTHER PERSONS THAT WILL OCCUPY THE PROPERTY	FULL NAME	RELATION	D.O.B.	FULL NAME	RELATION	D.O.B.
	FULL NAME	RELATION	D.O.B.	FULL NAME	RELATION	D.O.B.
	WILL A PET BE WITH YOU?		TYPE	BREED	WEIGHT	

### RENTAL HISTORY

PRESENT STREET ADDRESS	APT #	CITY	STATE	ZIP	DATES OF OCCUPANCY: MOVE IN: _____ MOVE OUT: _____
PRESENT LANDLORD / MORTGAGE CO. / APT. COMMUNITY	MONTHLY RENT:	PHONE NUMBER: (      )	OWN:	RENT:	
PREVIOUS STREET ADDRESS	APT #	CITY	STATE	ZIP	DATES OF OCCUPANCY: MOVE IN: _____ MOVE OUT: _____
PREVIOUS LANDLORD/MORTGATE CO./APT. COMMUNITY	MONTHLY RENT:	PHONE NUMBER: (      )	OWN:	RENT:	
PREVIOUS STREET ADDRESS	APT #	CITY	STATE	ZIP	DATES OF OCCUPANCY: MOVE IN: _____ MOVE OUT: _____
PREVIOUS LANDLORD/MORTGAGE CO./APT. COMMUNITY	MONTHLY RENT:	PHONE NUMBER: (      )	OWN:	RENT:	

### EMPLOYMENT HISTORY

NAME OF PRESENT EMPLOYER:	PHONE NUMBER INCL. AREA CODE: (      )	DIRECT SUPERVISOR/ HUMAN RESOURCES
EMPLOYMENT ADDRESS:	START/END DATE:	CURRENT POSITION HELD: MONTHLY GROSS INCOME (BEFORE TAXES)
NAME OF PREVIOUS EMPLOYER:	PHONE NUMBER INCL. AREA CODE (      )	DIRECT SUPERVISOR/HUMAN RESOURCES
EMPLOYMENT ADDRESS:	START/END DATE:	POSITION HELD: MONTHLY GROSS INCOME (BEFORE TAXES)
NAME OF PREVIOUS EMPLOYER:	PHONE NUMBER INCL. AREA CODE (      )	DIRECT SUPERVISOR/HUMAN RESOURCES
EMPLOYMENT ADDRESS:	START/END DATE:	POSITION HELD: MONTHLY GROSS INCOME (BEFORE TAXES)
NAME OF PREVIOUS EMPLOYER:	PHONE NUMBER INCL. AREA CODE (      )	DIRECT SUPERVISOR/HUMAN RESOURCES
EMPLOYMENT ADDRESS:	START/END DATE:	POSITION HELD: MONTHLY GROSS INCOME (BEFORE TAXES)

INCOME FROM ADDITIONAL SOURCES PLEASE LIST BELOW:		AMOUNT:			
<b>PERSONAL INFORMATION</b>					
HAVE YOU OR YOUR SPOUSE EVER BEEN EVICTED? YES      NO			HAVE YOU EVER BROKEN A RENTAL AGREEMENT? YES      NO		
HAVE YOU OR YOUR SPOUSE EVER BEEN CONVICTED OF A CRIMINAL OFFENSE? YES      NO			HAVE YOU EVER BEEN CONVICTED OF A DRUG RELATED CRIME? YES      NO		
NAME OF APPLICANT'S NEAREST RELATIVE	TELEPHONE (      )	STREET ADDRESS	CITY	STATE	ZIP
NAME OF SPOUSE'S NEAREST RELATIVE	TELEPHONE (      )	STREET ADDRESS	CITY	STATE	ZIP
EMERGENCY CONTACT:	WORK TELEPHONE (      )	HOME TELEPHONE (      )	STREET ADDRESS	CITY/STATE/ZIP	
WHICH OF THE ABOVE IS AUTHORIZED TO REMOVE AND/OR STORE ALL OF THE DWELLING AND/OR MAILBOX IN THE EVENT OF A SERIOUS ILLNESS OR DEATH OF RESIDENT? (CHECK ALL THAT APPLY)					
APPLICANT'S NEAREST RELATIVE		SPOUSE'S NEAREST RELATIVE		EMERGENCY CONTACT	

HOW DID YOU HEAR ABOUT OUR COMMUNITY? \_\_\_\_\_

I UNDERSTAND THAT I ACQUIRE NO RIGHTS IN THE APARTMENT UNTIL I SIGN THIS AGREEMENT AND SUBMIT A HOLDING FEE IN THE AMOUNT OF \$ \_\_\_\_\_ UPON APPROVAL OF TENANCY AND THE SIGNING OF AN APARTMENT RENTAL AGREEMENT, THIS FEE WILL BE CREDITED AGAINST MY DEPOSIT / NON-REFUNDABLE FEE AND/OR MY FIRST MONTH'S RENT. IN CONSIDERATION FOR LANDLORD HOLDING SAID APARTMENT AT THE ABOVE NAMED COMMUNITY, I HEREBY WAIVE ALL RIGHTS TO THE RETURN OF SAID HOLDING FEE AND SAID FEE SHALL BE RETAINED AS LIQUIDATED DAMAGES IN THE EVENT I DO NOT CHOOSE TO ENTER INTO THE AGREEMENT APPLIED FOR HEREIN. PURSUANT TO STATE AND FEDERAL FAIR CREDIT REPORTING ACTS, THIS IS TO INFORM YOU THAT AN INVESTIGATION INVOLVING THE STATEMENTS MADE ON YOUR RENTAL APPLICATION FOR THE ABOVE MENTIONED APARTMENT COMMUNITY, AS WELL AS INQUIRIES REGARDING YOUR CHARACTER, GENERAL REPUTATION, MODE OF LIVING AND PERSONAL CHARACTERISTICS MAY BE INITIATED. SHOULD YOUR APPLICATION BE DENIED, YOU HAVE THE RIGHT TO DISPUTE THE INFORMATION REPORTED. UPON WRITTEN REQUEST, YOU ARE ENTITLED TO A COMPLETE AND ACCURATE DISCLOSURE OF THE INVESTIGATION'S NATURE AND SCOPE, AS WELL AS A WRITTEN SUMMARY OF YOUR RIGHTS AND REMEDIES UNDER THE FAIR CREDIT REPORTING ACT. INQUIRIES SHOULD BE DIRECTED TO AAA LANDLORD SERVICES AT (480) 668-5953.

I/WE CERTIFY THAT, TO THE BEST OF MY/OUR KNOWLEDGE, ALL STATEMENTS ARE TRUE AND COMPLETE. I/WE AUTHORIZE INQUEST TO OBTAIN ALL REPORTS AND VERIFICATIONS NECESSARY TO VERIFY ALL INFORMATION PUT FORTH IN THE ABOVE APPLICATION AND TO FURNISH ALL INFORMATION TO THE LANDLORD NAMED ABOVE. FALSE, FRAUDULENT OR MISLEADING INFORMATION MAY BE GROUNDS FOR DENIAL OF TENANCY OR SUBSEQUENT EVICTION.

NON-REFUNDABLE APPLICATION FEE PAID \$ \_\_\_\_\_

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE SUBMITTED: \_\_\_\_\_

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE SUBMITTED: \_\_\_\_\_

AGENT FOR THE OWNER: \_\_\_\_\_ DATE RECEIVED: \_\_\_\_\_