

# SARES · REGIS Group

For Office Use Only	
Driver License # _____	
Verified? Yes <input type="checkbox"/>	No <input type="checkbox"/>

## CALIFORNIA APPLICATION TO LEASE

### INSTRUCTIONS TO APPLICANT:

One Application must be filled out COMPLETELY by each adult applicant.

When supplying names, give complete and full names including full middle names, if any. Sign on reverse side with your complete and full signature and list both your work and your home phone numbers. Do not give pager numbers.

When supplying addresses, give complete addresses including apartment numbers, cities, states and zip codes.

**WARNING:** This application may be refused and/or rejected if it is not signed, complete, or legible; if satisfactory identification is not presented; if any information is false, cannot be verified, or does not meet Owner's criteria; if additional information is requested from Applicant and is refused; or a Co-Applicant is rejected.

Do you have a pet?  Yes  No

How Many? \_\_\_\_\_

What Type? \_\_\_\_\_

For Office Use Only	
Address _____	
Apt. Type _____	
Move-In Date _____	
Rent _____	

Print Full Name- Last, First, Middle	Date of Birth	Social Security Number
--------------------------------------	---------------	------------------------

### RESIDENCE

Present Address (Number, Street, City, Zip) Rent <input type="checkbox"/> Own <input type="checkbox"/> Other <input type="checkbox"/>	How long?	Present Phone # ( )
---	-----------	------------------------

Detached family home <input type="checkbox"/> Attached family home <input type="checkbox"/> Apartment <input type="checkbox"/> Did you receive mail at this address? Yes ___ No ___	To whom do you make payments? Monthly Payment \$ _____ Company Name _____ _____ Address City Phone #
--	--

Previous Address (Number, Street, City, Zip) Rent <input type="checkbox"/> Own <input type="checkbox"/> Other <input type="checkbox"/>	How Long?
--	-----------

Detached family home <input type="checkbox"/> Attached family home <input type="checkbox"/> Apartment <input type="checkbox"/> Did you receive mail at this address? Yes ___ No ___	To whom did you make payments? Monthly Payment \$ _____ Company Name: _____ _____ Address City Phone #
--	--

Full names and dates of birth of all other occupants who will reside with you:	
Name: _____	Date of Birth _____
Name: _____	Date of Birth _____
Name: _____	Date of Birth _____
Name: _____	Date of Birth _____

### EMPLOYMENT or other verifiable source of income

Employer (If self-employed, name of business)	Phone #	Type of business	Position	How Long? Years _____ Months _____
Business address (Number, Street, City, Zip)	Supervisor	Phone #	Monthly Income \$ _____ Mo.	
Additional Verifiable Income	Source of Additional Verifiable Income:	Total Monthly Income:		
\$ _____	_____	\$ _____		

(Example: Pension, Investment Income/Dividend, Social Security, Alimony, Student Loan)

### FINANCIAL

Have you ever filed bankruptcy? Yes <input type="checkbox"/> No <input type="checkbox"/>	What Year? _____
County and State where filed: _____	
Have you ever had any suits, liens, judgments, evictions, or repossessions? Yes <input type="checkbox"/> No <input type="checkbox"/>	What Year? _____
County and State where filed: _____	

### PERSONAL

In case of emergency, please notify: (Local name, address and phone number)		
Name	Address	Home Phone Number
Relationship:	Work Phone Number	

(Please complete reverse side)

**PARKING OF RECREATION VEHICLES, BOATS, LARGE TRUCKS OR TRAILERS IS PROHIBITED**

<b>Please list all automobiles:</b>			
_____	Make _____	Year _____	License # _____
_____	Make _____	Year _____	License# _____
_____	Make _____	Year _____	License# _____
<b>Do you own any recreation vehicles?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		Boats _____	Trailers _____
		Mobile Home _____	Camper _____
<b>Do you own a waterbed?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		Liability insurance on waterbed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Do you have renter's insurance?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> YOU ARE REQUIRED TO CARRY A \$100,000 LIABILITY POLICY.			
<b>How did you first learn of this apartment community?</b>			
Newspaper <input type="checkbox"/> Drive By/Signs <input type="checkbox"/> Apartment Magazine <input type="checkbox"/> For Rent Magazine <input type="checkbox"/> Apartment Guide <input type="checkbox"/>			
Rent.com <input type="checkbox"/> RentNet.com <input type="checkbox"/> Apartments.com <input type="checkbox"/> SRGLiving.com <input type="checkbox"/> Resident Referral <input type="checkbox"/>			
Apartment Locator Service <input type="checkbox"/> Other <input type="checkbox"/> Please Specify _____			
What feature attracted you to this apartment community? _____			

This application is made for the purpose of procuring rental of herein described premises, and for credit clearance.

Everything that I have stated in this application is correct to the best of my knowledge. I understand that you will retain this application and all supporting documents whether or not it is approved. I hereby authorize Sares-Regis Group, through its designated agent and its employees to check my credit, employment, and rental history, and to answer questions about my credit experience. I understand that should I lease an apartment, Sares-Regis Group, and its agents shall have a continuing right to review my credit information, rental application, payment history and occupancy history for account review purposes and for improving application methods.

I hereby agree to release and hold harmless SARES · REGIS Group, its agents, servants and employees from any and all liability, legal proceedings and costs including attorney's fees arising out of either the verification of the information contained on this application form or the release of this information to other parties.

All of the above data and information set forth herein including, but not limited to, the statement of my income and financial condition is warranted to be true and accurate and to fully and correctly state my financial condition as of the date of this application. I also covenant and agree to notify you of any changes in the status of any of the aforementioned items during the period of my tenancy.

The Application Deposit is fully refundable only if written notice revoking this offer is received by the owner/manager within three (3) days. However, if owner/manager has duly accepted this offer to rent, this Application is then to be treated as a completed contract to rent/lease THE PROPERTY and Applicant's attempted revocation after three (3) days shall be deemed a breach of contract. In addition, the failure of Applicant to timely pay all sums due and execute the Rental Agreement/Lease shall be deemed a breach of contract. In either case, the Application Deposit shall then become nonrefundable to the extent that such deposit may be withheld and used to offset and recompense any and all losses incurred as a result of such breach. Otherwise, the Application Deposit will be applied towards the Security Deposit.

It is agreed that this deposit will be held by SARES · REGIS Group to reserve the premises listed herein for applicant's occupancy. The deposit will be nonrefundable after three (3) days except in the event applicant is not approved or possession of said premises cannot be delivered to applicant on the date specified.

It is also understood that the application fee is not a deposit and will not be refunded or applied to rent if applicant is approved or denied. This fee is for the cost to process the application.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
(print) Name of Leasing Consultant

\_\_\_\_\_  
Signature of Leasing Consultant

\_\_\_\_\_  
Date Signed