

APPLICATION TO RENT OR LEASE



TYG Manor
15009 Moor Park St Sherman Oaks, CA 91403

A completed "Application to Rent or Lease" must be submitted for each individual 18 years or older that will reside in the Apartment. All applications must be accompanied by a \$35.00 per applicant credit and consumer report fee. Please **PRINT CLEARLY**.

APPLICANT:

Name: _____ SSN: _____ DOB: _____
 First Middle Last
Driver's License Number: _____ State: _____ Exp: _____
Home Phone: () _____ Work Phone: () _____ Cell: () _____
Email Address: _____ Other Contact #: _____

NAME AND RELATIONSHIP OF ALL OTHER PROPOSED OCCUPANTS (DOB for All Minors):

NAME: _____ RELATIONSHIP: _____
NAME: _____ RELATIONSHIP: _____
NAME: _____ RELATIONSHIP: _____
NAME: _____ RELATIONSHIP: _____

EMPLOYMENT HISTORY (Minimum of 3 Years is Required):

A) Current Employer: _____ Dates of Employment _____ thru _____

Full Address: _____
Phone Number: _____ Supervisor's Name: _____
Position: _____ Gross Monthly Income: \$ _____

B) Prior Employer: _____ Dates of Employment _____ thru _____

Full Address: _____
Phone Number: _____ Supervisor's Name: _____
Position: _____ Gross Monthly Income: \$ _____

C) Previous Employer: _____ Dates of Employment _____ thru _____

Full Address: _____
Phone Number: _____ Supervisor's Name: _____
Position: _____ Gross Monthly Income: \$ _____

D) Previous Employer: _____ Dates of Employment _____ thru _____

Full Address: _____
Phone Number: _____ Supervisor's Name: _____
Position: _____ Gross Monthly Income: \$ _____

RENTAL HISTORY (Minimum of 3 Years Required):

A) Current FULL Address: _____

Dates of Occupancy: _____ thru _____ Monthly Rent/Mortgage: \$ _____

Owner/Management Company Name: _____ Phone # : (_____) _____

Reason For Leaving: _____

B) Prior FULL Address: _____

Dates of Occupancy: _____ thru _____ Monthly Rent/Mortgage: \$ _____

Owner/Management Company Name: _____ Phone # : (_____) _____

Reason For Leaving: _____

C) Previous FULL Address: _____

Dates of Occupancy: _____ thru _____ Monthly Rent/Mortgage: \$ _____

Owner/Management Company Name: _____ Phone # : (_____) _____

Reason For Leaving: _____

D) Previous FULL Address: _____

Dates of Occupancy: _____ thru _____ Monthly Rent/Mortgage: \$ _____

Owner/Management Company Name: _____ Phone # : (_____) _____

Reason For Leaving: _____

FINANCIAL INFORMATION:

A) Name of Bank/Credit Union: _____ Phone # : (_____) _____

Address: _____

Acct #: _____ Checking or Savings: _____ Balance: \$ _____

B) Name of Bank/Credit Union: _____ Phone # : (_____) _____

Address: _____

Acct #: _____ Checking or Savings: _____ Balance: \$ _____

C) Creditor: _____ Phone # : (_____) _____

Current Account Balance: \$ _____ Monthly Payment: \$ _____

D) Creditor: _____ Phone # : (_____) _____

Current Account Balance: \$ _____ Monthly Payment: \$ _____

E) Creditor: _____ Phone # : (_____) _____

Current Account Balance: \$ _____ Monthly Payment: \$ _____

PERSONAL REFERENCES:

A) Reference Name: _____ Phone # : (____) _____
Address: _____
Relationship to Occupant: _____

B) Reference Name: _____ Phone # : (____) _____
Address: _____
Relationship to Occupant: _____

C) EMERGENCY CONTACT: _____ Phone # : (____) _____
Address: _____
Relationship to Occupant: _____ Other Phone# or Email: _____

VEHICLE INFORMATION:

1) Name of Registered Owner: _____
Year: _____ Make: _____ Model: _____ Color: _____ License Plate # _____ State: _____

2) Name of Registered Owner: _____
Year: _____ Make: _____ Model: _____ Color: _____ License Plate # _____ State: _____

GENERAL INFORMATION: (Please indicate "Y" or "N" with any explanation as needed):

1. Have you ever had any credit problems? (Y/N) If so, please describe them: _____
2. Have you ever been convicted of a crime? (Y/N) If so, please describe: _____
3. Have you ever been evicted for non-payment of rent, or any other reason? (Y/N) If so, please describe: _____
4. Have you ever had a 3-Day Notice served on you, and/or an unlawful detainer filed against you? (Y/N) If so, please describe: _____
5. Do you have any pets? (Y/N) If so, please list type(s), name(s), color and approximate age(s) of all pets: _____
6. Do you intend to have an aquarium and required additional insurance? (Y/N) If so, please describe it/them: _____
7. Do intend to have a waterbed or other furniture with liquid filling material and required additional insurance? (Y/N) If yes, please describe it/them: _____
8. Do you intend to install or use a satellite dish or private use antenna in compliance with our antenna policy? (Y/N) If so, please describe: _____
9. Unit # you are applying for? _____ What is the monthly rent? \$ _____ What is the deposit? \$ _____
10. Can you pay the first month's rent and any deposits (cashiers check/money order ONLY) prior to taking possession? (Y/N)
11. By what date do you intend to take possession of the unit? _____ Can you fulfill our 1 year Lease requirement? (Y/N)
12. How did you hear about the building/vacancy? _____

The APPLICANT acknowledges the LESSOR'S policy that, if APPLICANT's application is approved, at any time during ensuing occupancy, any additional occupants of the unit, must complete an application & meet all of the requirements of the Criteria for New Resident Selection (current at the time the new resident applies), or else be refused occupancy AND represents that all information provided on this application is true and correct, and hereby authorizes verification of all references and facts; including but not limited to obtaining unlawful detainer, consumer reports, investigative reports, credit and bad check reports. APPLICANT waves claim and releases from liability any person providing or obtaining said verification or additional information. If the application is accepted and APPLICANT becomes a tenant, APPLICANT further authorizes OWNER and/or OWNER's agents and assigns to obtain investigative, credit, and consumer reports during this tenancy to monitor continued compliance with the "Criteria for New Resident Selection." APPLICANT also hereby acknowledges receiving, reviewing and accepting the conditions listed on the "Criteria For New Resident Selection".

APPLICANT'S SIGNATURE

APPLICANT'S NAME-PRINT

DATE