

Salinas Valley Realty
 Robert E. Whitlock, Broker
 22285 Capote Drive
 Salinas, CA 93908-1004
 831-277-9922 FAX 831-484-9613
 SalinasValleyRealty@gmail.com



APPLICATION TO RENT OR LEASE
PROPERTY AT _____

PERSONAL INFORMATION

NOTE: Each household member, 18 years or older, shall complete a separate application form.

FULL NAME OF APPLICANT _____ BIRTH DATE _____

OTHER HOUSEHOLD MEMBERS _____ BIRTH DATE _____
 (Adults & Children) _____ BIRTH DATE _____

_____ BIRTH DATE _____

_____ BIRTH DATE _____

SOCIAL SECURITY NUMBER OF APPLICANT _____

TOTAL **GROSS** MONTHLY HOUSEHOLD INCOME \$ _____

DRIVER'S LICENSE NUMBER _____ State _____ Expires _____

NOTE: Photo copy of current Driver's License or valid ID must be submitted when applicant is accepted for residency.

PRESENT ADDRESS/street/city/zip code _____

HOW LONG AT THIS ADDRESS _____ TELEPHONE /EMAIL _____

REASON FOR SEEKING NEW HOUSING ARRANGEMENTS _____

CURRENT MONTHLY RENT \$ _____ UTILITIES YOU PAY _____

NAME/ADDRESS OF OWNER/MANAGER _____

PHONE _____ FAX _____ EMAIL _____

PREVIOUS ADDRESS _____

NAME/ADDRESS OF OWNER/MANAGER _____

PHONE _____ FAX _____ EMAIL _____

RENT AMOUNT PAID _____ HOW LONG AT THIS PROPERTY _____

PRIOR ADDRESS _____

NAME/ADDRESS OF OWNER/MANAGER _____

PHONE _____ FAX _____ EMAIL _____

RENT AMOUNT PAID _____ HOW LONG AT THIS PROPERTY _____

EMPLOYMENT INFORMATION

PRESENT EMPLOYER OR SOURCE OF INCOME _____

HOW LONG EMPLOYED _____ GROSS INCOME _____ PER _____

BUSINESS ADDRESS _____ JOB POSITION _____

SUPERVISOR'S NAME _____ PHONE _____ FAX _____

PREVIOUS EMPLOYER OR OTHER SOURCE OF INCOME _____

HOW LONG EMPLOYED _____ GROSS INCOME _____ PER _____

BUSINESS ADDRESS _____ JOB POSITION _____

SUPERVISOR'S NAME _____ PHONE _____ FAX _____

SHOULD ABOVE LISTED EMPLOYMENT TOTAL LESS THAN 3 YEARS, PLEASE SUPPLY ADDITIONAL EMPLOYMENT HISTORY ON THE REVERSE SIDE OF THIS APPLICATION

OTHER INCOME/AMOUNT \$ _____ SOURCE _____

APPLICATION TO RENT OR LEASE (continued)

Salinas Valley Realty Property Management

VEHICLE INFORMATION

MAKE _____ YEAR _____ COLOR _____ LICENSE NUMBER _____ STATE _____
MAKE _____ YEAR _____ COLOR _____ LICENSE NUMBER _____ STATE _____
MAKE _____ YEAR _____ COLOR _____ LICENSE NUMBER _____ STATE _____
MAKE _____ YEAR _____ COLOR _____ LICENSE NUMBER _____ STATE _____

CREDIT INFORMATION

BANK/CHECKING _____ BANK/SAVINGS _____
BRANCH _____ BRANCH _____
MAJOR CREDIT CARDS _____

REFERENCES

NAME & RELATIONSHIP _____ / _____ PHONE _____
NAME & RELATIONSHIP _____ / _____ PHONE _____
NAME & RELATIONSHIP _____ / _____ PHONE _____

PETS/ANIMALS

WRITTEN permission must be given before any pet or animal is brought to the property. There may be a \$25 charge per month per pet or animal and/or a \$300 additional deposit required

PLEASE LIST HOUSEHOLD PETS/ANIMALS (Type, size, age, name) _____

PROJECTED MOVE-IN DATE _____

REFERENCE QUESTIONS

Have you ever been sued for non-payment of rent? _____ YES _____ NO
Have you ever been evicted or asked to leave a property? _____ YES _____ NO
Have you ever left a property before the end of the term of a lease? _____ YES _____ NO
Have you declared bankruptcy within the past seven years? _____ YES _____ NO
Have you ever been a party to an "Unlawful Detainer" action? _____ YES _____ NO
Have you ever been convicted of a criminal offense or plead "No Contest" to such? _____ YES _____ NO
Do you or any member of your household have gang-related tattoos? _____ YES _____ NO
Do you or any member of your household smoke? _____ YES _____ NO
Do you or any member of your household have allergies? _____ YES _____ NO
Are you or any member of your household allergic to mildew or mold? _____ YES _____ NO
Are you related to any tenant renting from Salinas Valley Realty? _____ YES _____ NO
Are you now or will you be operating a day care service? _____ YES _____ NO
Do you own a vacuum cleaner? _____ YES _____ NO
Do you own a tool box with basic tools? _____ YES _____ NO

AUTHORIZATION TO VERIFY INFORMATION

Applicant acknowledges that all information on this application is true and accurate. Applicant gives permission to Salinas Valley Realty to contact persons listed on this application for the purpose of verifying credit or personal information listed on this application.

Applicant authorizes **Salinas Valley Realty** the right to verify the information including, but not limited to : **Credit Reports, Employment or Source of Income status, previous rental status, named references and criminal records.**

SIGNATURE _____ DATE SIGNED _____

PLEASE RETURN THIS FORM WITH \$30 CASH OR MONEY ORDER . THIS APPLICATION FEE IS NON-REFUNDABLE

TENANT APPLICATION FEE RECEIPT	
CONSUMER CREDIT REPORT	\$12.00
VERIFICATIONS (JOB/RESIDENCE)	\$12.00
OFFICE EXPENSE	\$ 6.00
	Total <u>\$30.00</u>

Date Received _____

Received by: _____