

APPLICATION TO RENT

A SEPARATE APPLICATION TO RENT FORM MUST BE COMPLETED AND SUBMITTED FOR EACH PERSON 18 YEARS OF AGE OR OVER THAT PLANS ON OCCUPYING THE RESIDENCE.

Applicant is completing Application as a (check one) tenant or tenant with co-tenant(s). Total number of applicants: _____

Applying for _____ ("Premises") Rent: \$ _____

Soonest day you can move or take possession: _____

PERSONAL INFORMATION

FULL NAME OF APPLICANT _____		Date of birth	____/____/____
Social Security No.	_____	Driver's license No.	_____
		State	_____
		Expires	_____
Phone Number:	Home _____	Work _____	Cell _____
Email _____			
Name(s) of all other proposed occupant(s) and relationship to applicant (including ages) _____			

<input type="checkbox"/> Smoker	<input type="checkbox"/> Non Smoker	Pet(s) (number and type) _____	
Auto: Make	_____	Model	_____
		Year	_____
		License No.	_____
		State	_____
		Color	_____
Other vehicle(s): _____			
Does applicant or any proposed occupant plan to use liquid-filled furniture? <input type="checkbox"/> No <input type="checkbox"/> Yes Type _____			
Has applicant been a party to an unlawful detainer action or filed bankruptcy within the last seven years? <input type="checkbox"/> No <input type="checkbox"/> Yes			
If yes, explain _____			
Has applicant or any proposed occupant ever been asked to move out of a residence? <input type="checkbox"/> No <input type="checkbox"/> Yes			
If yes, explain _____			
Has applicant or any proposed occupant ever been convicted of or pleaded no contest to a felony? <input type="checkbox"/> No <input type="checkbox"/> Yes			
If yes, explain _____			
Has applicant or any proposed occupant ever been convicted as a sex offender? <input type="checkbox"/> No <input type="checkbox"/> Yes			
In case of emergency, person to notify _____ Relationship _____			
Address _____ Phone _____			

RESIDENCE HISTORY

Current address _____	Previous address _____
City/State/Zip _____	City/State/Zip _____
From _____ to _____	From _____ to _____
Rent \$ _____ Do you own this property? <input type="checkbox"/> No <input type="checkbox"/> Yes	Rent \$ _____ Did you own this property? <input type="checkbox"/> No <input type="checkbox"/> Yes
Name of Landlord/Manager _____	Name of Landlord/Manager _____
Landlord/Manager's phone _____	Landlord/Manager's phone _____
Reason for leaving current address _____	Reason for leaving previous address _____

EMPLOYMENT AND INCOME HISTORY

Current employer _____	Supervisor _____	From _____	To _____
Employer's address _____	Supervisor's phone _____		
Position or title _____	Phone number to verify employment _____		
Employment gross income \$ _____ per _____	Other \$ _____ per _____	Source _____	
Previous employer _____	Supervisor _____	From _____	To _____
Employer's address _____	Supervisor's phone _____		
Position or title _____	Employment gross income \$ _____	per _____	

Applicant's Initials (_____)

BANK INFORMATION

Name of bank/branch	Account number	Type of account	Account balance

NEAREST RELATIVES (THAT WILL NOT BE LIVING WITH APPLICANT)

Name _____	Address _____
Phone _____	Relationship _____
Name _____	Address _____
Phone _____	Relationship _____

Applicant understands and agrees: **(i)** this is an application to rent only and does not guarantee that applicant will be offered the Premises; and **(ii)** Landlord or Manager may accept more than one application for the Premises and, using their sole discretion, will select the best qualified applicant.

Applicant represents the above information to be true and complete, and hereby authorizes Landlord or Manager to: **(i)** verify the information provided; and **(ii)** obtain credit report on applicant.

If application is not fully completed, or received without the screening fee and a clear copy of the applicant's drivers license, the application will not be processed.

Applicant _____ Date _____ Time _____

SUBMISSION CHECKLIST

- | | |
|--|--|
| <input type="checkbox"/> Fully completed and signed application | <input type="checkbox"/> Clear copy of drivers license |
| <input type="checkbox"/> \$25 screening fee (*see below for exception) | <input type="checkbox"/> Proof of income (**see below) |

*If you are applying with a co-tenant that you have lived with for all of the previous three years then only one of you needs to submit the screening fee.

**If your income will be used to pay or help pay the rent, you can help to expedite the screening process by including proof of income with your application (such as recent paycheck stubs or recent bank statements that show regular income), as you may be asked for this later.

Submit your completed application with attached documentation, and screening fee made out to Dennis Wilson Properties, in person at: 29379 Rancho California Rd., Suite 200, Temecula, CA. Applications may be dropped off after hours through the office door mail slot. Long distance applicants may fax their applications to (951) 676-2042 and mail their screening fee separately to: Dennis Wilson Properties, P.O. Box 891004, Temecula, CA 92589. Call our office at (951) 676-8710 with any questions.

END OF APPLICATION

THIS SECTION TO BE FILLED OUT BY MANAGEMENT COMPANY

Rental amount: \$ _____ Lease from _____ to _____ or Month-to-month

Conditions/Responsibilities/Notes: _____

Rent for the period _____ to _____	\$ _____
Security deposit (not applicable toward last months rent)	\$ _____
Last months rent	\$ _____
Other _____	\$ _____
Total due prior to occupancy	\$ _____
Less amount received on _____	\$ _____
Balance due, on or before _____	\$ _____